## P06000092175

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DIVISION OF CORPORATIONS
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## **COVER LETTER**

TO: A	Amendment Section Division of Corporations	
SUBJEC	T: TK Defense Solutions Inc.	oration)
	. (	,
DOCUM	IENT NUMBER: <pre></pre>	
The enclo	osed Statement of Change of Registered Office/A	gent and fee are submitted for filing.
Please ret	turn all correspondence concerning this matter to	the following:
	Marc A.B. Silverman	,
	(Name of Contac	et Person)
	Marc A.B. Silverman Attorney at L (Firm/Comp	_aw pany)
	509 So. M.L. King Jr. Ave (Address	s)
	Clearwater, FI 33756 (City/State and 2	(in Code)
For furthe	er information concerning this matter, please call:	
Marc Silv	(Name of Contact Person)	at ( 727 ) 465-1977 (Area Code & Daytime Telephone Number)
Enclosed	is a \$35.00 check made payable to the Departme	nt of State.
·	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## \* STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chan	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this  ge is submitted for a corporation organized under the laws of the State of Florida  to change its registered office or registered agent, or both, in the State of Florida.
	e corporation: TK Defense Solutions Inc
	ffice address: 1101 Macrae Ave Clearwater, FI 33755
3. The mailing add	dress (if different): P.O. Box 4298 Clearwater, FI 33758
4. Date of incorpo	pration/qualification: 7/12/06 Document number: P06000092175
5. The name and s Florida Departr	pration/qualification: 7/12/06 Document number: P06000092175  street address of the current registered agent and registered office on file with the ment of State:  JNITED STATES CORPORATION AGENTS, INC.  13302 WINDING OAKS BLVD SUITE A-100  FAMPA FL 33612-3425
<u>_</u>	JNITED STATES CORPORATION AGENTS, INC .
	13302 WINDING OAKS BLVD SUITE A-100
-	ГАМРА FL 33612-3425
6. The name and s (if changed):	street address of the new registered agent (if changed) and /or registered office
<u> </u>	Marc A.B. Silverman
5	508 So. M.L. King Jr. Ave
·	(P.O. Box NOT acceptable)
-	Clearwater, FI 33756
The street address as changed will b	s of its registered office and the street address of the business office of its registered agent, e identical.
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
(Sign@base	Timothy Drewett President (Printed or typed name and title)
I hereby accept the I further agree to of my duties, and document is being corporation has to the I have a second	the appointment as registered agent and agree to act in this capacity.  comply with the provisions of all statutes relative to the proper and complete performance I am familiar with and accept the obligation of my position as registered agent. Or, if this gilled merely to reflect a change in the registered office address, I hereby confirm that the been political in writing of this change.
MAUU	MULLMAN 10/20/08
If signing on beha	affire of Registered Agent) (Date)
(Ty	ped or Printed Name)

\* \* \* FILING FEE: \$35.00 \* \* \*