P07000069997

(Requestor's Name)	_					
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(City/State/Zip/Phone #)	_					
PICK-UP WAIT MAIL						
PICK-UP WAIT MAIL						
(Business Entity Name)	_					
(Document Number)	_					
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Certified Copies Certificates of Status						
Special Instructions to Filing Officer:	٦					
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Office Use Only



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SLORE JARY OF STATE ALLAHASSEE, FLORID

FILED

COVER LETTER

TO: Amendment Section Division of Corporations	•						
SUBJECT: G+K S	(Name of Corporation)						
DOCUMENT NUMBER: P	07000069997						
The enclosed Statement of Change of Regis	stered Office/Agent and fee are submitted for filing.						
Please return all correspondence concerning	g this matter to the following:						
·	<u>-</u>						
Scott Mitchell							
(1	Name of Contact Person)						
C 4 al							
G+K Shipping, INC (Firm/Company)							
•	(Firm/Company)						
4270 N 12-	Jamel Wickers #194						
02/0 N. Fe	deral Highway #127 (Address)						
	(ridacos)						
Fort Laude	rdale, FL 33308						
	City/State and Zip Code)						
For further information concerning this mat	ter, please call:						
Scott Mitchell	954 × 600-8422						
(Name of Contact Person)	at (954) 600-8422 (Area Code & Daytime Telephone Number)						
Enclosed is a \$35.00 check made payable to							
Enclosed is a \$35.00 check made payable to	one Department of State.						
Mailing Address:	Street Address:						
Mailing Address: Amendment Secti							
Division of Corpo							
P.O. Box 6327 Tallahassee, FL 3	Clifton Building 2314 2661 Executive Center Circle						
runumoo, ru	Tallahassee, FL 32301						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	nge is submitted for a	corporation organiz	607.1508, or 617.1508, 1 ed under the laws of the S	State of Flo	
in order	r to change its registe	55	ed agent, or both, in the S	tate of Florida.	
1. The name of the	he corporation:	G+K	Shipping, in	c.	
2. The principal			ERAC Hwy #	127	
	Fol	1 LAUDERDA	LE PL 33301	<u> </u>	
3. The mailing ac	ddress (if different):_				<u>. </u>
4. Date of incorp	oration/qualification:	Jun 14, 200	Document number:	P07000	0069997
5. The name and Florida Depart		current registered age	ent and registered office or	n file with the	
rionaa Bopar	Lu	is Castro			
	621	8 N. GEDERM	- Hwy#127		
	FOR	1 LAUDERDALI	2 ,FL 33308		R 2 8
6. The name and	street address of the	new registered agent	(if changed) and /or regist	tered office	FEB 1
(if changed):	C	+ Mirchen	_		28 IASSI
	2181	, .			M IO
	6278	P.O. Box NOT acceptable)	Hwy #127		DI L
		LAU DERDAUE	FL 33308		DE S
The street address changed will	ss of its registered of be identical.	ffice and the street ac	ddress of the business off	fice of its regist	ered agent,
			by its board of directors of the cha		
/,	/ -	oration has been noti	, ,	nge.	
(Signatur	re of an officer or director)		(Printed or typed	1720	
I hereby accept a I further agree to of my duties, and document is bein corporation has	the appointment as r o comply with the pr d I am familiar with ng filed merely to rej been notified in wri	egistered agent and ovisions of all statut and accept the oblig flect a change in the ting of this change.	agree to act in this capa es relative to the proper ation of my position as r registered office address	city, and complete p egistered agent , I hereby confi	performance Or, if this orm that the
Au	Ant Mithel 2-25-08				
(Sig	mature of Registered Agent)	<u>, </u>	(Date)	
If signing on bel	half of an entity:				
(T	yped or Printed Name)				
		* * * FILING FEE	· \$35 00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)