

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000043388

**FILED**  
**Nov 27, 2013**  
**Secretary of State**

**Entity Name:** STHIKOTE INC.

**Current Principal Place of Business:**

13861 DANFORTH DR. S.  
JACKSONVILLE, FL 32224 US

**New Principal Place of Business:**

2384 VANS AVE  
UNIT 2  
JACKSONVILLE, FL 32207 US

**Current Mailing Address:**

13861 DANFORTH DR. S.  
JACKSONVILLE, FL 32224 US

**New Mailing Address:**

733 PEPPERVINE AVE  
SAINT JOHNS, FL 32259 US

**FEI Number:** 26-2520357

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

BUCK, THOMAS R  
13861 DANFORTH DR. S.  
JACKSONVILLE, FL 32224 US

**Name and Address of New Registered Agent:**

BUCK, THOMAS R  
733 PEPPERVINE AVE.  
SAINT JOHNS, FL 32259 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: THOMAS RYAN BUCK

11/27/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BUCK, THOMAS R  
Address: 733 PEPPERVINE AVE  
City-St-Zip: SAINT JOHNS, FL 32259 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS RYAN BUCK

PRES

11/27/2013

Electronic Signature of Signing Officer or Director

Date