

P09000011409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

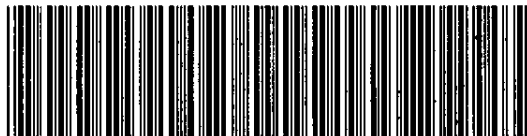
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A.

TB

NOV 17 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: KAROKINO, INC
Name of Corporation

DOCUMENT NUMBER: P09000011409

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT KARO
Name of Contact Person

KAROKINO, INC
Firm/Company

313 NE 2ND ST. # 701
Address

FT. LAUDERDALE, FL 33301
City/State and Zip Code

r/karo@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT KARO at (727) 466-8186
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department 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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA
I am in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: KAROKINO, INC.
2. The principal office address: 313 NE 2ND STREET, SUITE 701
FT. LAUDERDALE, FL 33301
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/4/2009 Document number: P0900 0011409
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

ROBERT L. KARO
3841 155TH AVENUE E.
PANORAMA, FL 34219

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ROBERT L. KARO
313 NE 2ND STREET
SUITE 701
P.O. Box NOT acceptable
FT LAUDERDALE, FL 33301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

Robert L. Karo, President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

11-9-09
Date

If signing on behalf of an entity:

ROBERT L. KARO
Typed or Printed Name

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