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R.A. Charge

C.COULLIETTE

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EXAMINER

COVER LETTER

Division of	f Corporations	
SUBJECT:	ARISKCO, I	NC.
	Name of Corp	poration
DOCUMENT NU	MBER: P1000	0031035
The enclosed State	ment of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all co	rrespondence concerning this matter to	the following:
	Brian Pin	
	Name of Conta	ct Person
	D: 0 D: 1	Levi di
	Brian G. Pincke	
	rim/Com	Sany
	9016 Philip	s Hwy
	Addres	s Hwy. s
	Jacksonville, I City/State and	FL 32256 Zip Code
	bpincket@matrixemplo	verservices.com
_	E-mail address: (to be used for futu	ire annual report notification)
For further informa	ation concerning this matter, please cal	:
	Brian Pincket	at (904) 886-6929 Area Code & Daytime Telephone Number
Nar	me of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.0	00 check made payable to the Departme	ent 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 cha	ange is submitted for a co	orporation organize	607.1508, or 617.1508, Flo ed under the laws of the Sta ed agent, or both, in the Stat	_{te of} Florida	
1. The name of	the corporation: ARIS	KCO, INC.			
2. The principal	office address: 9016 F	Philips Hwy., Jac	cksonville, FL 32256		
3. The mailing a	address (if different): Sa	nme			
4. Date of incor	poration/qualification: _	04/09/2010	Document number:	P10000031035	
	d street address of the cu rtment of State: (If resign		nt and registered office on f	file with the	
	Lindell & Farson, I	P.A.			
	12276 San Jose E	llvd., Suite 126			
	Jacksonville, FL 3	2223		<u>_</u> _	
6. The name and (if changed):	d street address of the ne		(if changed) and /or register	red office 10 OCT	"VISION OF
	9016 Philips Hwy.		cceptable		RY O
	11		cceptable	PM 12: 2	P 03.
The street addr	Jacksonville, FL 3 ess of its registered offill be identical.	· · · · · · · · · · · · · · · · · · ·	ddress of the business offic		ATTOMS
Such change wauthorized by t	as authorized by resolu he board, or the corpora	tion duly adopted lation has been noti-	by its board of directors or fied in writing of the chang	by an officer so ge.	
Signati	re of an officer or director		William L. Pere	no and title	-
I further agree of my duties, at document is be corporation to	t the appointment as reg to comply with the provind I am familiar with an ing filed merely to refle soeen notified in writin mature of Registered Jant ehalf of an enthy:	gistered agent and bisions of all statut ad accept the oblig ct a change in the gg of this change.	agree to act in this capaci es relative to the proper a ation of my position as reg registered office address, i	ty, id complete performan vistered agent. Or, if th I hereby confirm that th	ce iis ie
	Typed or Printed Name				

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