

P100000060609

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: R. Knight Consulting Inc.  
Name of Corporation

DOCUMENT NUMBER: P1000000760609

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:

Rachel Knight  
Name of Contact Person

R. Knight Consulting Inc.  
Firm/Company

16342 Chasewood Dr Apt H.  
Address

Jupiter, FL 33458  
City/State and Zip Code

RachK77@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rachel Knight at (561) 401-9011  
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 in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: R. Knight Consulting, Inc.
2. The principal office address: 6342 Chasewood Dr. Apt H.  
Jupiter, FL 33458
3. The mailing address (if different): same as above
4. Date of incorporation/qualification: 7/26/10 Document number: P1000000660609
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)

Business Filings Incorporated  
1203 Governors Square Blvd. Suite 101  
Tallahassee, FL 32301-2960

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

Rachel Knight  
6342 Chasewood Dr. Apt H.  
Jupiter, FL 33458

P.O. Box NOT acceptable

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.

Rachel Knight  
Signature of an officer or director

Rachel Knight, owner  
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.

Rachel Knight  
Signature of Registered Agent

12/8/10  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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