2001	UNIFORM BUSI	?)		FILE	D						
DOCUMENT # P97000099921 1. Entity Name RKM UNLIMITED, INC.				<u>. </u>	Apr 25, 2001 08:00 AM Secretary of State						
Principal Place		Mailing Address								-	
WINTER PARK 32792	FL FL	WINTER PARK 32792		FL							
Principal Place of Business S237 ARDMORE DR S237 ARDMORE DR S237 ARDMORE DR											
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State WINTER PARK	FL	City & State winter park		FL		FEI Number 9-3479596			— —	oplied For ot Applicable	
Zip 32 <i>7</i> 92	Country	Zip 32792	Count	ry	5.	Certificate of St	atus Desired		\$8.75 Ad	ditional]
	6. Name and Address of Current F	egistered Agent		· ,=	7. [Name and Add	ress of New R				_
MORO	RICHARD		į	Name	_						
5237 ARDMORE DR.				Street Ad	idress (P.O. É	lox Number is N	lot Acceptable)			1
WINTER PA	ARK FI US	,									
32172				City		_	-	FL	Zip Cod	le	
SIGNATURE _	named entity submits this statement for RICHARD J. MORO Signature, typed or printed name of registered agent as	id title if applicable. (NOTE:	Registered	Agent signatu	re required when re	-	the State of Flo	04/25/	/2001		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) Tax filing requirement and elects to do so. (See criteria on back) Tax filing requirement and elects to do so. (See criteria on back) Make Check Payable			1 Fee	vill be \$5	50.00		Campaign Fin nd Contribution		\$5.0 Added	May Be to Fees	
TITLE	OFFICERS AND I	DIRECTORS Delete	12.		D AD	DITIONS/CHA	NGES TO OFF	ICERS AND			٦
NAME STREET ADDRESS CITY-ST-ZIP	MORO KATHERINE J 6918 ALOMA AVE WINTER PARK	FL 32792		ET ADDRESS ST-ZIP	MORO 5237 ARDM WINTER P.		NE J	${f FL}$	Change 32792	Addition	034 (11/00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORO RICHARD J 6918 ALOMA AVE WINTER PARK	☐ Delete		et address St-zip	D MORO 5237 ARDM WINTER P.		J	FL	№ Change 32792	Addition	CR2E0
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete		T ADDRESS ST-ZIP					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-2IP					Change	☐ Addition	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP	_				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY-	T ADDRESS ST-ZIP					☐ Change	Addition	
of the core	ertify that the information supplied with on this report or supplemental report is coration or the receiver or trustee emport or on an attachment with an address, w	rue and accurate and that my vered to execute this report a tth all other like empowered.	v eman	IFA Chall he	ave the same pter 607, Flori	legal effect as i ida Statutes; an	f madada	ما خمطة بطفمه	m na officer	ar director	
DIGITAL	VIVE:	INTED NAME OF SIGNING OFFICER O	R DIRECTO	DR .			Date	D.	aytıme Phone #		