## P980009752/

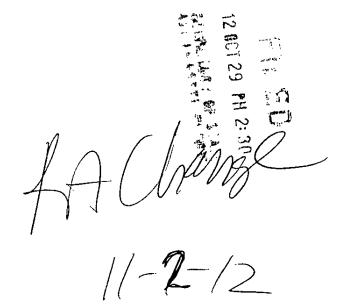
. (Requ	uestor's Name)	
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PICK-UP	WAIT	MAIL
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## **COVER LETTER**

CHANGE OF	FICERS FOR
SUBJECT: Success Marketer Name of Corp	oration Inc.
DOCUMENT NUMBER: P 9800009	752
The enclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Patti Poros Ki Name of Contact	et Person
Success Mart	•
5040 Robinson Address	ig Rd
Sarasota, FL City/State and 2	34233 Cip Code
E-mail address: (to be used for futu	ome ast. net re annual report notification)
For further information concerning this matter, please call	
Kathi Doroski	Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departme	ent of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

## 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: SUCCESS MARKETERS, INC.
2. The principal office address: 5040 Bobinson Rd
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/27/2003 Document number: P 98000097521
<ol><li>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)</li></ol>
Patti A BOROSKi
7040 Robinsong Rd-Sorasota, FL 34233 Resigned
$\mathcal{O}$
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Eugene Doroski 5040 Probinsons Pd-Sarasoto, EL 34233
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.
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 hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent 10/22/12 Date
If signing on behalf of an entity:
Eugene Boroski Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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