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**EXAMINER** 

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: R & K MARKETING, INC. (Name of Corporation)	ion)		
DOCUMENT NUMBER: S63432			
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:		
ANN K. SMITH, ES	SQUIRE		
(Name of Contact Person)			
SMITH GREENE & COMBS			
(Firm/Company)	)		
550 WATER STREET, SUITE 1150			
(Address)			
JACKSONVILLE, FL 32202 (City/State and Zip Code)			
For further information concerning this matter, please call:	, and the second		
the control of the co			
ANN K. SMITH at ( (Name of Contact Person)	904 ) 359-5505 Area Code & Daytime Telephone Number)		
(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	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		

## 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 & K MARKETING, INC.
2. The principal office address: 4426 CHASEWOOD DRIVE, JACKSONVILLE, FL 32225
3. The mailing address (if different): PO BOX 350489, JACKSONVILLE, FL 32235
4. Date of incorporation/qualification: 07/01/1991 Document number: S63432
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)
DAVID N. HARRISON
4426 CHASEWOOD DRIVE
JACKSONVILLE, FL 32225
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
ANN K. SMITH, ESQUIRE
550 WATER STREET, SUITE 1150 (P.O. Box NOT acceptable)
JACKSONVILLE, FL 32202
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.
DAVID N HARRISON (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.
10/10/08
(Signature of Registered Agent) (Date)  If signing on behalf of an entity:
ANN K. SMITH (Typed or Printed Name)

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

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314