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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corpora				
NAME OF CORPORATION: R&K Marketing, Inc. DOCUMENT NUMBER: 563432				
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.		
Please return all correspondence	ondence concerning this mat	ter to the following:		
	Julie	A. Harris	on	
	RZK	Name of Contact Person Marketing Firm/Company	Inc dba AIM	
	11057 Central Parkway, #401			
_	Jacksonvi	lle FL 3	52224	
City/ State and Zip Code				
inarrison@aimhere.net				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Julie Harrison at (904, 745-0022 ×100				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Moilin	a Address	Straat	Address	

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

Articles of Amendment

to
Articles of Incorporation
of

14	JJL	14	- 11	2

01	1 14
R&K Marketing, Inc	
(Name of Corporation as currently filed with the F	Florida Dept. of State)
563432	•
(Document Number of Corporation ((if known)
rsuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Floridu Profit Corporation adopts the following amendmen
If amending name, enter the new name of the corporation:	
	The new
me must be distinguishable and contain the word "corporatio Torp.," "Inc.," or Co.," or the designation "Corp." "Inc." or ' ord "chartered," "professional association." or the abbreviation	"Co". A professional corporation name must contain the
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	<u>ss:</u>
Name of New Registered Agent JULE A 11057 Central	Harnson L Parkulay #401
(Florida su New Registered Office Address: \ackson\illa	L Florida 32224
(City)	
ew Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New Registered	l Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:	, ana Sai	ly Smith, SV as an Add.	
X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	_		\
Add			
Remove			
6) Change			
Add		•	
Remove			

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(Attac	dditional sheets, if necessary). (Be specific)
	N/A
Ifan	endment provides for an exchange, reclassification, or cancellation of issued shares,
prov	ons for implementing the amendment if not contained in the amendment itself:
	not applicable, indicate N/A)
Δ_{i}	endment provides for and approved by all
<u>بر ب</u> ا	2 de la constante de la consta
0^{-1}	ficers of reclassification of shares!
	David N Harrison gifts 37 shares to
	Miles II Title II Tit
	The A Market Market Market Market Market
	Illie A Harrison as recipient townich
	Illie A Harrison as recipient townich
	Julie A Harrison as recipient-bwhich Julie A Harrison is majority Share holder with 51% Shares/Ownership

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voling group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 07/10/2014	
Signature De Colorian	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Tulie A Harrison (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	