

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000020973

Entity Name: KINGDREAMZ ENT, LLC

**FILED**  
**Feb 02, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4733 WALDEN CIRCLE #181  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 617402  
ORLANDO, FL 32861

**New Mailing Address:**

FEI Number: 27-2031800

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WILLIAMS, ERROL A  
4733 WALDEN CIRCLE #181  
ORLANDO, FL 32811 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ERROL WILLIAMS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WILLIAMS, ERROL A  
Address: 4733 WALDEN CIRCLE #181  
City-St-Zip: ORLANDO, FL 32811

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ERROL WILLIAMS

MGRM

02/02/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date