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JAN 1 0 2012

**EXAMINER** 

## **COVER LETTER**

Division of Corporations	
SUBJECT: KING OF KINGS TO Name of Limited Liability	Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change a	nd fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	ne following:
MAKSY JIMENEZ  Name of Person  KING OF KINGS TENNIS, U.C.  Firm/Company  1003 IDAHO Ct.  Address  OCOEE, FC 34761  City/State and Zip Code  JMAKSY D YAHOO. COM	12 JAN - 9 PH 1: 35 TALLAHASSEE, FLORIBA
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:	ਲਾਜੰ <b>ਦ</b> ੀ ≫
MAXSY JIMENEZ  at (407  Name of Person at (407  STREET/COURIER ADDRESS: MAII  Registration Section Regis  Division of Corporations Divisi  Clifton Building P.O. B	ea Code & Daytime Telephone Number

\$55 Filing Fee & Certified Copy

\$25 Filing Fee

Enclosed is a check for the following amount:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.5 liability company submits the following statement in order agent, or both, in the State of Florida.	r to change its registered office or registered
1. Name of the limited liability company: KING OF	KINGS TENNIS, LLC.
2. (a) Principal office address of limited liability company	-10 ad
(Note: MUST BE STREET ADDRESS)	ORLANDO, FL 32811
(b) Mailing address of limited liability company:	5518 METrONEST BLVD. #20
(Note: MAY BE POST OFFICE BOX)	ORLANDO, FL 32811
April 4+4, 2011	L 11000040039
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	MAKSY JIMENEZ =
Registered Office Address:	5518 METVOWEST BLVD. 1# 228 ORLANDD, FL 338/11
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent:</u> NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	MAXSY TIMENEZ  1003 ISAHO Ct.  OCOEE, FL 34761
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company  Signature of a member of authorized representative of a member  MAXSY TIMENEY  Printed or typed name of signee  I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of the obligations of my positive to the product of the provisions of the obligations of the product of the provisions of the obligations of the product of the product of the provisions of the obligations of the product of the product of the product of the provisions of the obligations of the product of the product of the product of the product of the provisions of the product of the produc	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization.
Signature of Registered Agent	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00