## L12000 129876

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



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SECRETARY OF STATE
PALLAHASSEF FIORITA

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## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: KINGDOM KEYS REALTY  Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Regina Brass 1						
Kingdom Keys Realty Firm/Company						
5540 Rosehill Rd. #101 Address	T					
Sarasota FL 34233  City/State and Zip Code  Regiona @ Kinadom Keus Real tu Sarasota . com	CHRE					
Regima @ Kingdom Keys Realty Sarasota, com Email address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Regina Brassil at (941) 737-9189  Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following amount:						

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

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

	liability company submits the following statement in order agent, or both, in the State of Florida.	to change its registered office or registerea		
	1. Name of the limited liability company: KINGDOM KEYS REALTY			
	2. (a) Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	73 South Palm Avenue Suite 303 Sarasota FL 3+236		
	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	73 Sowth Palm Avenue Suite 303 Sarasota Fl 34236		
	11-5-2012	L12000129876		
	3. Date of filing/registration in Florida	Document number		
	5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	Registered Agent:	Regna Brassil		
	Registered Office Address:	3900 ClarkRd DZ		
		Sarasota FL 3+233		
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	V Registered Office address:		
	NEW Registered Agent:	1887 - T		
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	73 South Palmica Venue		
		Sarasota ST. Ft 3HEBL		
<	If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company.  Signature of a member of authorized representative of a member  REGINA BRASSIL	orida street address of the registered office		
	Printed or typed name of signee			
_	I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address. I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.		
_	Signature of Registered Agent			

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