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(Requestor's Name)					
(Address)					
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COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Divi	sion of Corporations						
SUBJECT:	Promised Investment Land LLC						
	Name of Limited Liability Company						
Dear Sir or N	Madam:						
The enclosed	d Registered Agent/Registered Offi	ce Change a	nd fee(s) are submitted for filing.				
Please return	all correspondence concerning thi	s matter to th	ne following:				
Melissa Th	nigpen						
	Name of Person		 -				
Promised	Investment Land LLC						
	Firm/Company						
3354 Meri	dian Way S Unit B				19 0		
	Address				0CT -2		
Palm Bead	ch Gardens, FL 33410						
	City/State and Zip Code	<u>. </u>			PM 3: 34		
promisedi	nvestment@gmail.com			Ç.	₩		
E-mail	address: (to be used for future ann	ual report no	tification)				
For further is	nformation concerning this matter,	please call:					
Melissa Th	nigpen	561	317-5187				
	Name of Person		Area Code & Daytime Teleph	one Nun	nber		
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							
Enc	losed is a check for the following	amount:					
☑ \$:	25 Filing Fee		\$55 Filing Fee & Certified Copy				

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

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l. Na	ame of the limited liability company: Promised Inve	estmer	t Land LL	C
2. (a)		(1	·)	
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ((b)	
	6041 Kimberly Blvd Suite H		3354 Me	eridian Way S Unit B
	North Lauderdale, FL 33068	- -	Palm Be	ach Gardens, FL 33410
	10/25/2016		i Hanna	0196521
3.	Date of filing/registration in Florida	- 4.		Document number
5. (a)	Rodney Gerard Thigpen Sr.			
J. (a)	Registered Agent and Registered Office shown on the records of t	he Florid	Dept. of State	::
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS		
	13302 Winding Oak Court A	2011001	4	and
	Tampa	33612		9 OCT
/1 N	Rodney G. Thigpen	_	•	FILED -2 PH
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	
	160 W. Camino Real			3 3 F
	NEW Registered Office Address:	_		**
	Unit 860	_		
	Boca Raton , FL	334 <i>3</i> 2	_	
agent was/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regine the second	stered office ompany, it is ited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
I hereb provision he obli to mere notified	we of a member or authorized tepresentative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete to gations of my position as registered agent as provided by reflect a change in the registered office address, I have writing of this change.	e to act perform for in (ereby co	in this capa ance of my a Chapter 605, onfirm that i	Printed or typed name of signee secity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been