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## **COVER LETTER**

## TO: Registration Section Division of Corporations

SUBJECT: \_\_\_\_\_

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KINGSTON ELITE LLC

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:

LIZANDER MELHADO

Name of Person

Firm/Company

12750 SW 4th CT, APT 406 J

Address

PEMBROKE PINES, FL 33027

City/State and Zip Code

lizmelhado@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LIZANDER MELHADO	954 it (	815-0013
Name of Person	\	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAI	LING ADDRESS:
Registration Section	Regis	stration Section
Division of Corporations	Divis	ion of Corporations
Clifton Building	P.O.	Box 6327
2661 Executive Center Circle	Talla	hassee, Florida 32314
Tallahassee, Florida 32301		
Enclosed is a check for the following an	iount:	
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□ \$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.

I Na	me of the limited liability company:	KINGST	ON ELITE LLC			
2. (a)	12750 SW 4th CT. APT 406 J PEMBROKE PINES, FL	(b) 12750 SW 4th CT. APT 406 J PEMBROKE PINES, FL,				
(a)	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )	_ ("/	-	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
3.	02/23/2018 Date of filing/registration in Florida		L17000192922 Document number			
5. (a)	BUSINESS FILINGS INCORPORATED					
y. (u)	Registered Agent and Registered Office shown on the records of th	he Florida Dep	t, of State:			
	1200 SOUTH PINE ISLAND RD PLANTATIC	)N, 33324				
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	Ac ::	2318		
	1200 SOUTH PINE ISLAND RD PLANTATION,	FL 33324		APR 26		
	, FL		ASSEE FLORID			
	,					
(b)		_				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address				
	LIZANDER MELHADO					
	NEW Registered Office Address:					
	12750 SW 4th CT, APT 406 J PEMBROKE PINES, FL 330	27				
	51					
	, t <sup>*</sup> L,					
the ch: agent v was/wo	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of ieles of organization or the operating agreement of the l	the registere bility compa f the limited limited liabi	ed office and the business office of t any, it is hereby confirmed that the cliability company or as otherwise p	he registerec change(s)		
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee			
provisi the obi to mer notifie	by accept the appointment as registered agent and agri ions of all statutes relative to the proper and complete ligations of an position as registered agent as provided elv reflect alphange in the registered office address, I h d'in writing d'this change	ee to act in 1 performance 1 for in Chaj iereby confi	this capacity. I further agree to con e of my duties, and I am familiar wit pter 605, F.S. Or, if this document i rm that the limited liability company	iply with the ih and accep is being filea y has been		
-		lox 6277- 7	Tallahassaa VI 27214			
	Division of Corporations P.O. B	OUX 032/■   EI2: 636.00	ananassee, r 1, 52314			

FILING FEE: \$25.00