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COVER LETTER

TO: Registration Division of C		•	ų .	r,
Kind	gdom Strateg	ic Manage	ement. LLC	
SUBJECT:		Name of Limited Liabi		_
Dear Sir or Madam:				
The enclosed Stateme	nt of Correction and fee(s) a	are submitted for filing		
Please return all corre	spondence concerning this r	natter to the following		
Podnov I	Rurne			
Rodney J	Name of Person			
·	Firm/Company	· · · · · · · · · · · · · · · · · · ·		
16091 Bla	itt Boulevard	. #303		
	Address	,		
Weston, F	L 33326			201 FAL 5:
	City/State and Zip Code			SH SH
				ASSE AND A SECOND
E-mail address:	(to be used for future annua	report notification)		7 2 M
	n concerning this matter, pl	0 = 4	040 5404	\$ 8
Rodney J.		at (<u>954</u>	913-5464	
Nan	ne of Person	Area Code	Daytime Telephone Number	
STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, Florida 3	ons r Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check f	or the following amount:			
■ \$25 Filing Fee	S30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	& S60 Filing Fee, Certificate of Status & Certified Copy	
CR2E062 (9/15)				

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. <u>FIRST</u>: The name of the limited liability company is: Kingdom Strategic Management, LLC The Florida Document number of the limited liability company is: L17000218445 SECOND: Articles of Organization THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT [vx] Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Article IV - The name and address of person authorized to manage LLC: Title Managing Member, Rodney J. James Correct name should should be: Rodney J. Burns <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are \Box as follows: <u>OR</u> \Box The electronic transmission of the record was defective. Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change. Registered Agent's Signature

Filing Fee:

Certified Copy:

\$25.00

\$30.00 (optional)

CR2E062 (9/15)