48000175411

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





900318701339

09/28/18--01011--032 **25.00

18 SEP 28 MI 8: 57

COVER LETTER

Division of Corporations				
24 Hour Kings, LLC SUBJECT:				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
Lance Andrews				
Name of Person				
The Hayes Law Group, P.A.				
Firm/Company				
4701 Central Avenue, Suite A				
Address				
St. Petersburg, FL 33713				
City/State and Zip Code				
lance.andrews@thehayeslawgroup.com				
E-mail address: (to be used for future annual re	port notification)			
For further information concerning this matter, please	e call:			
Lance Andrews	727 381-9026			
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:				
2 \$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

1. Na	ame of the limited liability company: 24 Hour King		
2. (a)	24 Hour Kings, LLC	(b) 24 Ho	ur King, LLC
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2000 13th Avenue No	2000 1	3th Avebue No.
	St. Petersburg, FL 33713	ST Pe	tersburg, FL 33713
	7/20/2018	L 18000175411	
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Jessica K.Simpsom		
J. (a)	Registered Agent and Registered Office shown on the records of	f the Florida Dept. of S	tate:
	2000 13th Avenue No.		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
			Ţ. *
	St. Petersburg	L33713	EP 2
		<u> </u>	SEP 28 AM
(b)	The Hayes Law Group, P.A.		
	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:	e 51
			, 1
	NEW Registered Office Address:		
	4701 Central Avenue, Suite A		
	St. Petersburg	L_33713	
the cha agent v was/w the art	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the registered off iability company, i of the limited liabi	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany. Simpson
	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obt to mer	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this change.	ree to act in this co e performance of m ed for in Chapter 6 hereby confirm the	apacity. I further agree to comply with the ly duties, and I am familiar with and accep 05, F.S. Or, if this document is being filed at the limited liability company has been

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

Signature of Registered Agent