

L18000255 923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

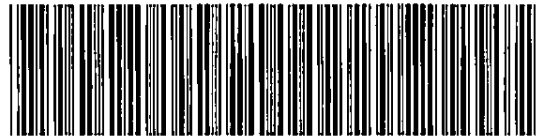
(Business Entity Name)

(Document Number)

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STATE OF ARIZONA  
TALLAHASSEE 1000

D. ERUICE  
DEC 01 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KINGPIN JAL 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:

JESUS FARIA

Name of Person

KINGPIN JAL LLC

Firm/Company

5259 IMAGES CIR APT 206

Address

KISSIMMEE FLORIDA 34746

City/State and Zip Code

jesusrodolfofaria@gmail.com

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

For further information concerning this matter, please call:

JESUS FARIA

Name of Person

at ( 786 ) 7570355

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:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

FILED  
2010 NOV 19 PM 1:28  
TALLAHASSEE, FLORIDA  
CLERK OF CIRCUIT COURT

**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. Name of the limited liability company: KINGPIN JAL LLC

2. (a) Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*

(b) Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*

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8546 PALM PARKWAY PMB 375

KISSIMMEE FL 34746

ORLANDO FLORIDA 32836

10/31/2018

L-18000255923

3. Date of filing/registration in Florida

4. Document number

5. (a) JESUS FARIA

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

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KISSIMMEE, FL 34746

(b) JESUS FARIA

Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

8546 PALM PARKWAY PMB 375

ORLANDO, FL 32836

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

JESUS FARIA

Printed or typed name of signee

*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.*

Signature of Registered Agent

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2018 NOV 19 PM 1:26  
TALLAHASSEE, FL 32314