

L21000056358

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

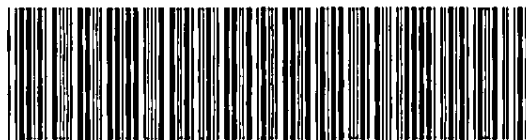
(Business Entity Name)

(Document Number)

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1/2/2021

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Kings Recreational Properties 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:

Michael D King  
\_\_\_\_\_  
Name of Person

Kings Recreational Properties LLC  
\_\_\_\_\_  
Firm/Company

10093 SE Sunset Harbor Rd  
\_\_\_\_\_  
Address

Summerfield, FL 34491  
\_\_\_\_\_  
City/State and Zip Code

lisamike1529@gmail.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mike King 765 863-1838  
\_\_\_\_\_  
Name of Person at ( ) Area Code & Daytime Telephone Number

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Enclosed is a check for the following amount:**

- \$25 Filing Fee     \$55 Filing Fee & Certified Copy