## 421000334971

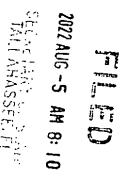
(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAI	L							
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								

Office Use Only



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08/05/22--01019--016 \*\*25.00



## **COVER LETTER**

INHS18 (2/14)

	egistration Section ivision of Corporations		, •
SUBJEC <sup>*</sup>	Kingdom REACH Leadership, LL	.C	
50505		ame of Limited Lial	pility Company
Dear Sir o	r Madam:		
The enclos	sed Registered Agent/Registered C	Office Change and fe	e(s) are submitted for filing.
Please retu	urn all correspondence concerning	this matter to the fo	llowing:
Latondra l	łeaven		
	Name of Person		-
Kingdom I	REACH Leadership, LLC		
-	Firm/Company	· ·	-
403 W Ma	in Street		
	Address		-
Leesburg,	FL 34748		
•	City/State and Zip Code	;	-
info@king	domreachleadership.com		
E-ma	ail address: (to be used for future a	nnual report notifica	ation)
For furthe	r information concerning this matte	er, please call:	
Latondra F	łeaven	407 at (	984-6824
	Name of Person		Area Code & Daytime Telephone Number
R D P.	lailing Address: egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	nclosed is a check for the following \$25 Filing Fee	_	Tallahassee, FL 32303 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.

2 (a)		(b	))				
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(-	M	ailing address of lim (Note: MAY BE PC	ited liabil	ity comp	any:
	403 W Main Street		403 W Mair	1 Street			
	Leesburg, FL 34748		Leesburg, F	L 34748			
	07/23/2021		L210003349	71			
3.	Date of filing/registration in Florida	4.		Document numbe	r		· ·-
5 (a)							
5. (a)	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of State:				
	Latondra Heaven		·				
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS	5)				
	487 Nuestra Place						
	Groveland	FL_34736			<u>(/</u> :	20	
	, I	· L			A.C.	2022 AUG	
(b)					innín Domini	9	
(0)	Enter name of NEW Registered Agent and/or NEW Register		dress:		AHAS	2	to better
					SSE	A	
	Latondra Heaven				ma	œ.	
	NEW Registered Office Address:						<del></del> -
	403 W Main Street				' 1	0	
	Leesburg	34748					
	,	L					
If the l	imited liability company is not organized under the lear changes are made, the Florida street address of the	aws of the	State of Flored office and	ida, it is hereby of the business office	confirms ce of the	d that	after the ered
agent v	will be identical. Or, in the case of a Florida limited	liability co	mpany, it is l	hereby confirmed	d that the	e chang	ge(s)
was/wo	ere authorized by an affirmative vote of the members igles of organization or the operating agreement of the	s of the lim	iited liability iability comp	company or as o sany.	unerwise	provi	gea in
$\gamma_{\alpha}$	Londra (Pleaner		ondra Heaven	,			
こノルハ	ture of a member or authorized representative of a member			Printed or typed nam	ne of signe	e	
Signa				nity I further an	ree to co	mnlv v	vith the
I herei provisi the obl to mere	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, d'In writing of this khange.	gree to act le perform led for in ( I hereby co	in this capac ance of my di Chapter 605, onfirm that th	ativ. I juriller agi uties, and I am fa F.S. Or, if this d se limited liability	miliar w locumen v compa	vith and t is bei ny has	d acc ng fil been