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(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Danish Maria
(Document Number)
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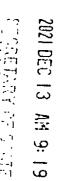


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COVER LETTER

Div	ision of Corpo	rations					
SHIB IF CT.	KINGDOM B	NCOUNTER LANDCAPIN	G LLC				
SUBJECT: Name of Limited Liability Company							
The enclosed	l Articles of Ar	mendment and fee(s) are subr	nitted for filing.				
Please return	all correspond	ence concerning this matter t	o the following:				
		Arthur T. Hinton III					
			Name of Person	<u> </u>	<u> </u>		
		Kingdom Encounter Landso	caping LLC				
Firm/Company							
	10701 Cross Creek Blvd Unit 101						
			Address		- "		
		Tampa, Florida 33647					
			City/State and Zip (Zode			
		ewc.seniorpastor@gmail.cor	n o be used for future an	anual report positiv	ention		
For further in	oformation con	cerning this matter, please ca		muar report nourie			
Brittany C. F		······································	407 at (394-4855		2021 S I C	
	Name of P	erson	Area Code	Daytime [*]	Felephone Number	2021 DEC 13 \$108515133 \$108115133	n allect
Enclosed is a	check for the	following amount:				1500 15 27	
≡ \$25.00 F	iling Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Certified Cop (additional copy	ру	Certified C	ng Fee, 9	

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

Registration Section

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KINGDOM ENCOUNTER LANDSCAPING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compan Florida document number L21000498205 .	y were filed on 11-19-2021	and assigned
Florida document number L21000498205		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC	"C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	or the abbreviation "IIC."
	, FI	orida
	City	Zip Code

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
President	Arthur T. Hinton III	10312 Birdwatch Drive, Tampa FI, 33647	= Add
			□Remove
			□Add
			□Remove
			🗆 Add
			□Remove
			□Change
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		. —————————————————————————————————————	🗆 Add
			□Remove
			□Change

	rmation, enter change(s) here: (Attach additional sheets, if necessary.)	
	·	
ote: If the date inserted in th	the date of filing:	5.0207 eđ as
s filed.	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	r the
ned November 29	2021	
No. 15 History III	Signature of a member or authorized representative of a member	
Artfur T. Hinton II	Typed or printed name of signee	

Filing Fee: \$25.00