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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: KINGDOM PEALTY Name of Limited Lie	ADVISORS CCC ability 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 f	ollowing:
TARNOWSKI GARY Name of Person	
KING DOWN PEALTY ADVIS	DRS UC
1808 JAMES L FROMAN	- PKWY, Si, TE 149
Plant City FL 3356 City/State and Zip Code	3
E-mail address: (to be used for future annual report norms	il.com
For further information concerning this matter, please call:	
GARY TARVOWSKI at (404)) 988-1950 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

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

S25 Filing Fee

Enclosed is a check for the following amount:

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.

summis me jonoring statement in order to change his regime et office or registered agent, or rolli, in the state by riorie	ш.
1. Name of the limited liability company: KINGDOM PEALTY ADVISORS CO	<u>.c</u>
2. (a) ISOS JAMES L REGIMAN PLUY (b) ISOS JAMES L REGIMAN Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)	А
SUITE 149 SUITE 149	
PLANT City, FL 33563 FLANT City, FL 3356	<u> 2</u> §
OZ-Z4-2022 Date of filing/registration in Florida LZZ00009895 Document number	<u>/</u>
5. (a) UNITED STATES CORPORATION AGENTS INC Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
SuiTE 36 2	
ORLANDO ,FL 32822 FAR T	
(b) TARNOWSKI GARY Enter name of NEW Registered Agent and/or NEW Registered Office address: 1808 TAMES L PROMAN PKWY 33 77 30 77 30 77 30 30 77 30 30	
NEW Registered Office Address:	
SUITE 149	
PLANT Coty FL 33563	
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.	ne
Signature of a member or authorized representative of a member Signature of a member or authorized representative of a member 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.	e pt d

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