## K22000289059

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## COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Kingdom Land Mule of Limited Liab	ility 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:			
Emmanuel Fleming Name of Person  Kingdom Land Investments LLC Firm/Company	-		
5112 Dartmouth Ave. N Address		2022 A	
St Petrisbula 1 F1 33710  City/State and Zip Code	- 	2022 AUG 24	
Email address: (to be used for future annual report notifice	付s, COM girantion)	AH 9:	
For further information concerning this matter, please call:	- (	55	
Emmanuel Fleming at (7)7 Name of Person	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)

☑ \$25 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.

1. Name of the limited liability company: Kingdom	Land Investments LLC
2 (a) 1700 GG th S+ N #1011-1032	(b) 1700 GG+h S+ N # 104-103
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
St. Petersburg, FL	St. Poto(Shura, FL
33710	33710
06/27/2022	L22000289059
3. Date of filing/registration in Florida 4.	Document number
5. (a) Emmanuel Fleming	
Registered Agent and Registered Office shown on the records of the Flo	orida Dept. of State:
5112 Dartmouth Ave. N	
Registered Office Address (MUST BE FLORIDA STREET ADDR	ESS)
	202:
St. Petersburg . Fl. 3	2022 AUS
<u></u>	. N
(b) Emmanuel Heming	
Enter name of NEW Registered Agent and/or NEW Registered Office	e address:
1762 city of	9:5
700 GGT ST N	
NEW Registered Office Address:	
Suite 104	<del></del>
St. Petersburg . F. 3	3370
18 at 1 limite at 15 at	the State of Bloride it is homely confirmed that after the
If the limited liability company is not organized under the laws of change or changes are made, the Florida street address of the regis	stered office and the business office of the registered
agent will be identical. Or, in the case of a Florida limited liability was/were authorized by an affirmative vote of the members of the	company, it is hereby confirmed that the change(s) limited liability company or as otherwise provided in
the articles of organization or the operating agreement of the limite	ed liability company.
C 17 1/2	Emmanuel Fleming Printed or typed name of signee
Signature of a member or authorized representative of a member	
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete perfo the obligations of my position as registered agent as provided for to merely reflect a change in the registered office address. I hereb notified in writing of this change:	act in this capacity. I further agree to comply with the rmance of my duties, and I am familiar with and accept in Chapter 605, F.S. Or, if this document is being filed y confirm that the limited liability company has been
Simultana of Danisland Apart	
Signature of Registered Agent	