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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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LLC REGISTERED AGENT CHANGE KINGS KITCHEN & CATERING, LLC

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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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

L Na	nne of the limited liability company: Kings Kitchen & C	atenng, LLC	
2. (a)		(b)	
·	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	12/19/22	L220005	328170
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	INC AUTHORITY RA		
J. (u)	Registered Agent and Registered Office shown on the records of t	he Florida Dept. of	State:
	390 NORTH ORANGE AVE., STE 2300-N		
	Registered Office Address IMUST BE FLORIDA STREET A	(DDRESS)	<u> </u>
	ORLANDO FI	32801	
(b)	Registered Agents Inc		2023 NOV 27 PH
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	
	7901 4th St N		1 2 2 2 2 2 3 4 5 6 7 1 1 1 1 1 1 1 1
	NEW Registered Office Address:		. ?
	STE 300		
	St. Petersburg , FL	33702	
the cha agent v was/we the arti	imited liability company is not organized under the lawinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registered of ibility company, f the limited liability of the limited liability of the limited liability of the limited liability of the l	fice and the business office of the registered it is hereby confirmed that the change(s) offity company or as otherwise provided in
1\	ture of a member or authorized representative of a member	Robin Jones	Division of the Control of the Contr
I herei provisi the obl to mere	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete jigations of my position as registered agent as provided by reflect a change in the registered office address. I have a change in the registered office address. I have a change in the registered of the change.	performance of i I for in Chapter wereby confirm th	Printed or typed name of signee capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been
으로 스	re of Registered Agent	•	