

N 14000000402

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

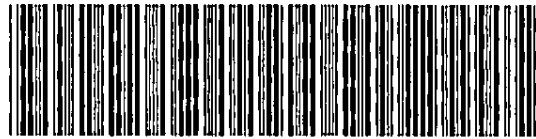
(Business Entity Name)

(Document Number)

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TO: Amendment Section
Division of Corporations

SUBJECT: KINGSTON TECHNICAL HIGH SCHC
Name of Corporation

DOCUMENT NUMBER: N14000000402

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Annette Gardiner

Name of Contact Person

KTHS Past Student Assoc. of Flori

Firm/Company

P.O. Box 120951

Address

Fort Lauderdale, FL 33312

City/State and Zip Code

ktpsfl@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Annette Gardiner

Name of Contact Person

at (954) 257-8897

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: KINGSTON TECHNICAL HIGH SCHOOL PAST STUDENT
2. The principal office address: 15701 NW 2ND AVENUE, #115, NORTH MIAMI BEACH, F

3. The mailing address (if different): P.O. BOX 120951, FORT LAUDERDALE, FL 33312

4. Date of incorporation/qualification: 1-13-2014 Document number: N14000000402

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Karel McIntosh (Deceased)

15701 NW 2nd Avenue, #115

North Miami Beach, FL 33169

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Marlando Christie

5703 NW 48 Lane

P.O. Box NOT acceptable

Tamarac, FL 33319

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

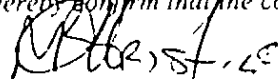


Signature of an officer or director

Annette Gardiner, President

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

01/12/19

Date

If signing on behalf of an entity:

KTHS Past Student Assoc., of Flor

Typed or Printed Name

***** FILING FEE: \$35.00 *****

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314