## N1400002550

(Requ	uestor's Name)	
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(City/:	State/Zip/Phone #	)
PICK-UP	MAIT	MA‡L
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SECRETARY OF STATE
TALLAHASSEE, FL

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## **COVER LETTER**

TO: Amendment Sections
Division of Corporations

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NAME OF CORPORATION:	CHAMBER OF COMMERCE INC.
46-5113750 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Claudette	Robinson
	(Name of Contact Person)
	(Firm/ Company)
5024 L	iming Ave
	(Address)
Orlando F	TL 32808
	(City/ State and Zip Code)
Claudetterobinson90	0@gmail.com
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter	, please call:
Claudette Robinson	321-418-5625 at
(Name of Contact	Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount i	made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing I Certificate of S	
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Kingdom Chamber of Commerce, Inc

(Name of Corporation as currently filed with the	: Florida De	pt. of State	)			
46-	-5113750					
(Docun	nent Number	of Corpora	tion (if known)			
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes	, this <i>Florid</i>	a Not For Profi	t Corporation ado	pts the foll	owing
A. If amending name, enter the new name of the	e corporatio	<u>n:</u>				
					The	e new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		on" or "ince	orporated" or th	e abbreviation "C	orp." or ".	Inc."
B. Enter new principal office address, if applica						
(Principal office address <u>MUST BE A STREET A</u>	<u>DDRESS</u> )					
	_				SECF TAI	20211
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)				LA	83.
					HAS	2
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D. If amending the registered agent and/or registered agent and/or the new registered.			Florida, enter	the name of the	J.E.	53
Name of New Registered Agent:	Lincoln Ro					
	4823 Silver	Star Road S	Suite 160			
New Registered Office Address:			(Florida str	eet address)		
	Orlando			, Florida	2808	
		(City)		(Zip Co	de)	
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen			dagcept the obl	igations of the pos	ition.	
_	Sier	ature of Ne	w Registered Ag	ent, if changing		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT         John Do           V         Mike Jo           SV         Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add	<u>PR</u>	Claudette A. Robinson	5024 Liming Ave Orlando FL 32808
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove  5) Change Add Remove			
6) Change Add			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adoption date this document was signed.	:	, if other than the
Effective date <u>if applicable</u> :	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Departmen	s not meet the applicable statutory filing requirements, this date will not not of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	by the members and the number of votes east for the amendment(s)	

 $\sigma_{\rm const}(x) = (1 + \epsilon x)^{-1}$ 

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adopted by the board of directors.
Dated $02/05/2021$
Signature 47
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Lincoln A. Robinson (Typed or printed name of person signing)
Chairman
(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were