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| (Re | equestor's Name) | |
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| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Nar | me) |
| (Dc | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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JUN 17 2020

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

| NAME OF CORPORATION: | i Inc |
|--|--|
| DOCUMENT NUMBER: | |
| The enclosed Articles of Amendment and fee are subn | |
| Please return all correspondence concerning this matte | er to the following: |
| | Karen King |
| | (Name of Contact Person) |
| | Kingdom Kids United Inc |
| | (Firm/ Company) |
| | 10901 Burnt Mill Rd |
| | (Address) |
| | Jacksonville, FL 32256 |
| | (City/ State and Zip Code) |
| | kkingbeauty@gmail.com |
| E-mail address: (to be used | for future annual report notification) |
| For further information concerning this matter, please | call: |
| Kim King | 904 438-1690 at |
| (Name of Contact Person) | |
| Enclosed is a check for the following amount made pa | yable to the Florida Department of State: |
| □ \$35 Filing Fee | S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
| Mailing Address Amendment Section | Street Address Amendment Section |
| Division of Corporations | Division of Corporations |

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Kingdon Kids United Inc

| (Name of Corporation as o | currently filed with the Flor | ida Dept. of State) |
|--|--------------------------------------|---|
| | N19000006731 | |
| (Document | Number of Corporation (if k | nown) |
| Pursuant to the provisions of section 617,1006, Florida mendment(s) to its Articles of Incorporation: | Statutes, this <i>Florida Not Fo</i> | r Profit Corporation adopts the following |
| A. If amending name, enter the new name of the cor | poration: | |
| Kingdom Kids United Inc | | The new |
| ame must be distinguishable and contain the word "co | orporation" or "incorporated | I" or the abbreviation "Corp." or "Inc." |
| 3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDI</u> | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX | <u> </u> | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered of | | enter the name of the |
| Name of New Registered Agent: | | |
| New Registered Office Address: | (F) | orida street address) |
| | | , Florida |
| | (City) | (Zip Code) |
| Sew Registered Agent's Signature, if changing Regi- hereby accept the appointment as registered agent. I | | the obligations of the position. |
| | Signature of New Regist | ered Agent, 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 | <u>PT</u> <u>V</u> <u>SV</u> | John Doe Mike Jones Sally Smith | |
|----------------------------------|------------------------------------|---------------------------------------|---------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | _ | | |
| Add | | | |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5)Change | <u> </u> | | |
| Add | | | |
| Remove | | | |
| | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Arti | cles, enter change(s) here: | | |
|---|-----------------------------|-----------|--------------|
| (attach additional sheets, if necessary). | (Be specific) | | |
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| The date of each amendate this document was: | dment(s) adoption:signed. | if other than the |
|--|--|------------------------|
| Effective date <u>if applic</u> | | |
| | (no more than 90 days after amendment file date) | |
| | ed in this block does not meet the applicable statutory filing requirements, this date will te on the Department of State's records. | I not be listed as the |
| Adoption of Amendme | ent(s) (<u>CHECK ONE</u>) | |
| ☐ The amendment(s) was/were sufficient | was/were adopted by the members and the number of votes cast for the amendment(s) t for approval. | |
| There are no membadopted by the boa | pers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors. | |
| Dated | April 23, 2020 | |
| Signature | Karin King | |
| | (By the chairman or vice chair) nan 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) | |
| | Karen King | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |