N21000000250

(Re	equestor's Name)	
(Ac	ddress)	
(A	ddress)	
	,	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bo	usiness Entity Nam	e)
(Do	ocument Number)	
ertified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	0#2211 0 1	
	Office Use Only	Y



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S. YOUNG

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: God's Kingdom Building Name of Corporation	Inc	
DOCUMENT NUMBER: N210000	000250	
The enclosed Statement of Change of	of Registered Office/Agent and fee are submitted for filing.	
Please return all correspondence cor	ncerning this matter to the following:	
Rolbert Labady		
Name of Contact Person		
Firm/Company		
4850 Indialantic Dr		
Address		
Orlando FL 32808		
City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
LRolbert@yaho	o.com	
E-mail address: (to be used for fu	ture annual report notification)	
For further information concerning t	his matter, please call:	
Rolbert Labady	at (407) 219-0430 Son Area Code & Daytime Telephone Number	
Name of Contact Per	son Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made pa	yable to the Department of State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporat	• • • • • • • • • • • • • • • • • • •	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

Pursuant to the provisions of sections 607.0302, 613 statement of change is submitted for a corporation of	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida
	registered agent, or both, in the State of Florida.
1. The name of the corporation: God's Kingdom Buil	ding Inc
2. The principal office address: 4850 Indialantic Dr.,	Orlando FL 32808
3. The mailing address (if different):	
4. Date of incorporation/qualification: January 6, 202	Document number: N21000000250
5. The name and street address of the current register Florida Department of State: (If resigned, enter re	•
Rolbert Fabady	
485E Indialantic Dr	
Orlando FL 32808	
6. The name and street address of the new registered (if changed):	, or
Rolbert Labady	P
4850 Indialantic Dr.	
P	O. Box NOT acceptable
Orlando FL 32808	
The street address of its registered office and the s as changed will be identical.	street address of the business office of its registered agent,
Such change was authorized by resolution duly ad authorized by the board, or the corporation has been	opted by its board of directors or by an officer so en notified in writing of the change.
the Con	Jerome Durosier, Sec
Signature of an officer or director	Printed or typed name and title
Thereby accept the appointment as registered age. I further agree to comply with the provisions of all of my duties, and I am familiar with and accept the document is being filed merely to reflect a change corporation has been notified in writing of this change.	l statutes relative to the proper and complete performance e obligation of my position as registered agent. Or, if this in the registered office address. I hereby confirm that the
	January 18, 2021
Signature of Registered Agent	Date
If signing on behalf of an entity:	
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 CR2E045 (04/13)