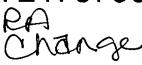
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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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5/1/15

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT. Kendall Kingdom Homeowner's Association, Inc.

Name of Corporation

DOCUMENT NUMBED: N99000005548

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:

William G. Essig, Esq.

Name of Contact Person

Essig Law Group, P.A.

Firm/Company

10691 N. Kendall Drive, Suite 206

Address

Miami, Florida 33176

City/State and Zip Code

wessig@essiglawgroup.com

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

For further information concerning this matter, please call:

Rolando Cerit

,305

274

5244

Name of Contact Persor

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

statement of change is submitted for a corporation organized under the laws of the State of Florida **Florida** **Torida** **Torida**
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Kendall Kingdom Homeowner's ASS
2. The principal office address: c/o Exclusive Management Group,
5201 Blue Lagoon Drive, Suite 805, Miami, FL 3
3. The mailing address (if different):
4. Date of incorporation/qualification: 9/20/99 Document number: N 9900000 5548
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)
Cuevas, Ortiz + Goldstein, P.A.
7480 SW 40th St.
MINMI F1. 33155
70/10/11
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Essla Law Group, P.A
10691 N. Kendall Dr. Svite 206
Mami FL 331710
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 office for director Caclos M Garces 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 Date
If signing on behalf of an entity:
William Essig Typed or Printed Name

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

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