

P0900DDO20061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

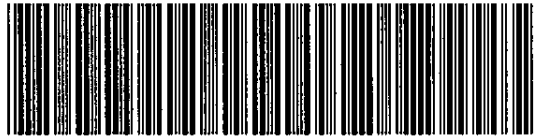
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 DEC 10 PM 2:00

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Kingdom Creations, Inc  
Name of Corporation

**DOCUMENT NUMBER:** P 09000020061

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:

Nestor Martinez  
Name of Contact Person

Kingdom Creations, Inc.  
Firm/Company

36 NE 1ST Suite 304  
Address

Miami, FL 33132  
City/State and Zip Code

nermaga74@yahoo.es.  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nestor Martinez at (305) 305 5939  
Name of Contact Person 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

\$ 35.00  
Florida department State

**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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Kingdom Creations, Inc
2. The principal office address: 36 NE 1st Suite 304 Miami, FL 33132
3. The mailing address (if different): 2725 NW 169 TER Miami, FL 33056
4. Date of incorporation/qualification: 2/26/09 Document number: P 09000020061

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)

Nestor Martinez  
14312 SW 181 Terrace, Miami, FL 33177  
Office: 14312 SW 181 Terrace, Miami, FL 33177

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

Nestor Martinez (New Agent address)  
2725 NW 169 TER, Miami, FL 33056  
New office: 36 NE 1st Suite 304 Miami, FL 33132

P.O. Box NOT acceptable

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]  
Signature of an officer or director

Nestor Martinez  
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]  
Signature of Registered Agent

12/7/09  
Date

If signing on behalf of an entity:

Nestor Martinez  
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 (8/05)