P09000036110

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							



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R.A.

TBrown 12-2-11

COVER LETTER

Division of	Corporations						
SUBJECT:	King Inspections, Inc. Name of Corporation						
		name or	Corporan	on			
DOCUMENT NUMBER:		P09000036110					
The enclosed States	nent of Change	of Registered Off	fice/Agent	and fee are sub	omitted for filing.		
Please return all co	rrespondence co	oncerning this mat	ter to the f	ollowing:			
			112				
Beverly King Name of Contact Person							
	Firm/Company						
	2200 Muse Rd						
	Address						
Labelle, FL 33935 City/State and Zip Code							
		·					
kinginspections@yahoo.com E-mail address: (to be used for future annual report notification)							
		or (10 0 0 1101	racare an	maar report in	our out out		
For further informat	ion concerning	this matter, please	e call:	,			
	Beverly King	9	at (863	458-2144		
Nam	e of Contact Pe	erson	Ā	rea Code & Da	458-2144 ytime Telephone Number		
Enclosed is a \$35.00) check made pa	ayable to the Depa	irtment of	State.			
	Division of P.O. Box €	of Corporations 6327 ee, FL 32314	N .	Clifton Buil	Section Corporations ding tive Center Circle		

TO:

Amendment Section

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

statement of cha	provisions of sections 607.0. ange is submitted for a corpo er to change its registered off	oration organized	under the laws of the State	of Florida
1. The name of	the corporation: King Ins	pections, In	C.	
2. The principal	office address: 2200 Mus	e Road, Labe	lle, FL 33935	
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification:0	04/23/2009	_ Document number:	P09000036110
	d street address of the current rtment of State: (If resigned,		and registered office on fil	e with the
	Douglas W. Oesterle			
	9506 Red Road			
	Miami, FL 33157			一義のこ
6. The name and (if changed):	d street address of the new re	gistered agent (if	changed) and /or registered	TALLAHASSEE, FI. OR STATE
	Beverly King			
	2200 Muse Road			——————————————————————————————————————
	Labelle, FL 33935	P.O. Box NOT acce	eptable	
The street addreas changed will	ess of its registered office ar be identical.	nd the street add	ress of the business office	of its registered agent,
Such change wa authorized by th	as authorized by resolution the board, or the corporation	duly adopted by has been notifie	its board of directors or bed in writing of the change	y an officer so
- Janeari III	re of an utilies of director		Beverly King, I	President
I hereby accept I further agree to of my duties, and document is bei	the appointment as register to comply with the provision of I am familiar with and ac ng filed merely to reflect a c s been notified in writing of	ns of all statutes ecept the obligati change in the re	ree to act in this capacity relative to the proper and ion of my position as regis gistered office address, I k	complete performance tered agent. Or, if this vereby confirm that the
<u> </u>			11/23/20)11
If signing on to	half of an antity:		Date	
ii signing on be	half of an entity:			
Ту	Beverly King yped or Printed Name			

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