## PIUMO9392

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R. WHITE

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: ABSENAL KINGS INC  Name of Corporation
DOCUMENT NUMBER: <u>P14000093928</u>
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:
MICHAEL MATTHEWS Name of Contact Person
APSENAL KINGS ENC. Firm/Company
75 MERCUTIO LANE Address
ST. AUGUSTINE F.L. 32092 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MICHAEL MATTHEWS at (9/4) 310 6727  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



June 3, 2016

MICHAEL MATTHEWS 75 MERCUTIO LANE ST AUGUSTINE, FL 32092

SUBJECT: ARSENAL KINGS INC Ref. Number: P14000093928

We have received your document for ARSENAL KINGS INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 5 and 6 have been left blank. Please complete the missing sections.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 016A00011731

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508 ange is submitted for a corporation organized under t er to change its registered office or registered agent,	the laws of t	he State of <u>F</u>	60310		
1. The name of t	the corporation: ABSENAL KINGS	INC				
2. The principal	l office address: 75 MER CUTIO h	ANE	STAUBU	STINE	E Fi	h,
3. The mailing a	address (if different):				32	9
4. Date of incorp	poration/qualification: 11/18/2014 Docu	ment numbe	r: P1400	009	39	28
	d street address of the current registered agent and reg rtment of State: (If resigned, enter resigned)	gistered offic	ce on file with t	he		
	75 MERCUTIO LANE					
	ST. AUGUSTINE FIL, 320	92				•
					ङो	
6. The name and (if changed):	d street address of the new registered agent (if change	ed) and /or re	egistered office		JUN 15	lumps to a
	P.O. Box NOT acceptable	AUGUS Fil, 3			PH 4: 03	2 /2 /2 2 /2 /2 2 /2 /2 2 /2 /2 2 /2 /2 2 /2 /2 2 /
The street addre	ess of its registered office and the street address of t be identical.	he business	office of its re	gistered a	agent,	
	as authorized by resolution duly adopted by its board he board, or the corporation has been notified in wri	d of director ting of the c	s or by an offic hange.	cer so		
Mikel Signatur	MICHAI ure of an officer or director	Printed or type	HEWS PR	ESIDER	40	-
I hereby accept i I further agree to performance of i agent. Or, if thi hereby confirm t	the appointment as registered agent and agree to a to comply with the provisions of all statutes relative my duties, and I am familiar with and accept the ob is document is being filed merely to reflect a change that the corporation has been notified in writing of	ect in this ca to the prop bligation of i e in the regis this change	pacity. er and complei ny position as stered office ad	'e registere ldress, l	rd	
minul	netth 5/	20/16				
_	chalf of an entity:	D	ate		-	
	the KINGS INC  yped or Printed Name					

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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