P1700042852

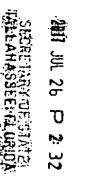
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COVER LETTER

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TO: Amendment Section Division of Corporations

SUBJECT: Kohanim Records, INC

Name of Corporation

DOCUMENT NUMBER: P17000042852

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:

Angelo Smith

Name of Contact Person

Kohanim Records INC

Firm/Company

1407 Peg Lane

Address

Orlando, FL 32808

City/State and Zip Code

kohanimrecords@gmail.com

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

For further information concerning this matter, please call:

Angelo Smith

,407

8007616

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

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

statement of ch	ne provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this change is submitted for a corporation organized under the laws of the State of Florida	
	der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	of the corporation: Kohanim Records INC	
2. The principa	al office address: 1407 Peg Lane Orlando FL 32808	
3. The mailing	g address (if different):	
4. Date of incom	orporation/qualification: 05/11/2017	
5. The name an	nd street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)	
	Legal Corp Solutions, LLC	
	3440 W Hollywood Blvd. Suite 415	
	Hollywood FL 33021	
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or registered office	
	Angelo Smith	
	1407 Peg Lane	
	Orlando, FL 32808	
The street address changed will	ress of its registered office and the street address of the business office of the registered agent.	
Such change wa authorized by th	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Phel	ure of an officer or director ANGELO SMITH (DIRECTOR Printed or typed name and title	2)
I hereby accept I further agree to performance of agent. Or, if the hereby confirm	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as registered his document is being filed merely to reflect a change in the registered office address, I hat the corporation has been notified in writing of this change.	,
Lele	gnature of Registered Agent 7/24/2017	
	chalf of an entity:	
2 0		
Ty	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 * * *