P1800055056

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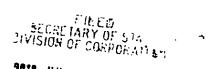
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COVER LETTER

TO: Amendment Section Division of Corporations



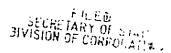
2010 JUL -3 AM 11: 25

NAME OF CORPO	RATION: KINGDOM KEYS	S HOME SOLUTIONS, IN	IC.				
DOCUMENT NUM	P18000055056			_			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.					
Please return all corre	espondence concerning this ma	tter to the following:					
	NATASHA MASON						
Name of Contact Person							
	KINGDOM KEYS HOME SOLUTIONS, INC.						
		Firm/ Company					
4561 NW 9TH AVENUE							
	Address						
	POMPANO BEACH, FL 33	064					
	City/ State and Zip Code						
FAT	PRAYSELLI@GMAIL.CON	1					
	· ·	sed for future annual report	notification)	<u>—</u>			
	.,		,				
For further information	on concerning this matter, pleas	se call:					
NATASHA MASON	Į.	954 at (934-8656				
Name	of Contact Person		ode & Daytime Telephone N	umber			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:				
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address		Street	Address				
	endment Section	Amendment Section					
	vision of Corporations	Division of Corporations					
P.O. Box 6327 Clifton Building Tallahassee, Fl. 32314 2661 Executive Center Circle							
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Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation



KINS 61
KINGDOM KEYS HOME SOLUTIONS, INC (NAME FILED ERRONEOUSLY)

2010 JUL -3 AM 11: 25.

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P18000055056	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation: KINGDOM KEYS HOME SOLUTIONS, INC.	THE STATE OF THE S
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	4561 NW 9TH AVENUE
(Principal office address MUST BE A STREET ADDRESS)	POMPANO BEACH, FL 33064
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 934877
	MARGATE, FL 33061
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
	Projectored Avant if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	пеѕ		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	Title		Name		<u>Addres</u> s
I) Change		_		-	
Add				-	
Remove					
2) Change				_	
Add				_	
Remove					
3) Change		_		_	
Add				_	
Remove					
4) Change					
Add		_			
Remove				•	
5) Change					
Add		_		•	·· · · ·
Ruu Remove				-	
Kemove					
6) Change		_		-	
Add				•	
Remove					

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
·	
·	
_ -	· · · · · · · · · · · · · · · · · · ·
f an amendment provides for an exchange the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	trainent is not contained in the amenament riger.

The date of each amendment(s) a	JUNE 20, 2018		, if other than the
date this document was signed.	10ption:		, ii other than the
Effective date <u>if applicable</u> :			
	(no more than 90 day	s after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De		statutory filing requirements, this date will	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were add by the shareholders was/were so		ber of votes cast for the amendment(s)	
	proved by the shareholders through very each voting group entitled to vote s	voting groups. The following statement reparately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were suf-	ficient for approval	
by	(voting group)	"	
	(voting group)		
☐ The amendment(s) was/were add action was not required.	opted by the board of directors with	out shareholder action and shareholder	
The amendment(s) was/were addaction was not required.	opted by the incorporators without s	hareholder action and shareholder	
JUNE 25. Dated Signature	addinaso		_
		if directors or officers have not been ds of a receiver, trustee, or other court	
	ted fiduciary by that fiduciary)	as of a receiver, musice, of other count	
	NATASHA MASON		
	(Typed or printed name	of person signing)	
	PRESIDENT/ACTIVE BROKER		
	(Title of per	con cionina)	 -

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