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James

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: 3 KINGS INVES	TMENT GROUP INC	· 		
DOCUMENT NUMB	ER:P18000094423				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	KESHAV AGRAWAL				
•		Name of Contact Person			
PREM TAX AND ACCOUNTING CORP					
-		Firm/ Company	· · · · · · · · · · · · · · · · · · ·		
	4260 WESTBROOK DR, SU	HTE 107			
-		Address	·		
	AURORA, IL 60504				
·		City/ State and Zip Code			
INFO	@SMALLTAX.NET		/		
-	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call: _630	448-2066		
		at (	_)		
Name o	f Contact Person	Area Coc	le & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depar	rtment of State:		
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amendi Division Clifton 2661 E:	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

3 KINGS INVESTMENT GROUP INC

( <u>Name o</u>	f Corporation as current	ly filed with the Florida Dept. of State)		
P18000094423				
· <del>-</del> · · · · · · · · · · · · · · · · · · ·	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the fo	ollowing umend	lment(s) t
A. If amending name, enter the new na	ime of the corporation:		The i	
	ation "Corp," "Inc," or	on," "company," or "incorporated" or "Co". A professional corporation name "P.A."	the abbreviat	ion
B. Enter new principal office address,	B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		LONGWOOD, FL 32750		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5753 SAYBROOK CIRCLE	2019 SE	
		SANFORD, FL 32771	· '-ci	77 27 10
		-	70	- ; - ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
D. If amending the registered agent an new registered agent and/or the new			2:15	the second
Name of New Registered Agent	SUNIL SULTANIA			
	5753 SAYBROOK CIRCLE			
	(Florida s	treet address)		
New Registered Office Address:	SANFORD		Florida 32771	
		(City)	(Zip Code)	_
New Registered Agent's Signature, if c I hereby accept the appointment as regist		it: with and accept the obligations of the po	sition.	
		fa-		
<del></del>	Signature of New	Registered Agent, if changing	<del></del>	

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 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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally St	mith_	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) X Change	PTSD		SUNIL SULTANIA	5753 SAYBROOK CIRCLE
Add				SANFORD, FL 32771
Remove				
2) Change	Р		MICHAEL THOMPSON	120 EAST RICH AVENUE
Add				DELAND, FLORIDA 32724
X Remove				
3) Change	V		TROY MICHEL EDWARDS	120 EAST RICH AVENUE
Add	<del></del>	·		DELAND, FLORIDA 32724
X Remove				
4) Change				
,		<del></del>		
Remove				-
5) Change				
Add		<del></del>	-	
Remove				
0 0				
6) Change		<del></del>		
Add				
Remove				

Attach additional sheets, if necessary). (Be spe						
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<u>f an amendment provides for an exchange, re</u>	<u>classificatio</u>	n, or cance	<u>llation of i</u>	ssued share	<u>'S.</u>	
provisions for implementing the amendment	if not contai	ned in the :	<u>amendmer</u>	nt itself:		
(if not applicable, indicate N/A)						
		<del></del>		<del></del> -		
		-				
					_	
- <del> </del>						

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statemen or each voting group entitled to vote separately on the amendment(s):	t
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
9/4/2019		
DatedSignature	Jan de la companya della companya della companya de la companya della companya de	
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	SUNIL SULTANIA	
	(Typed or printed name of person signing)	•
	PRESIDENT	
	(Title of person signing)	<del></del>