

P22 000 059 824

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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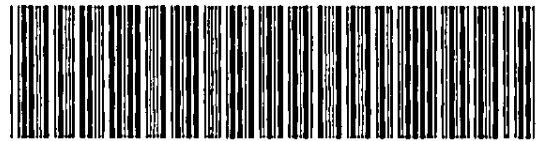
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Kingdom First Real Estate, Inc.

DOCUMENT NUMBER: P22000059824

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel Turner

Name of Contact Person

Kingdom First Real Estate, Inc.

Firm/ Company

8517 Gunn Highway

Address

Odessa, FL 33556

City/ State and Zip Code

kingdomfirstrealestate@gmail.com

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

For further information concerning this matter, please call:

Daniel Turner

Name of Contact Person

at (813) 468-9581

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Kingdom First Real Estate, Inc

P22000059824

N/A

N/A

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Q#	Q	Ans	Explain
1)	Change	_____	N/A
	Add	_____	_____
	Remove	_____	_____
2)	Change	_____	_____
	Add	_____	_____
	Remove	_____	_____
3)	Change	_____	_____
	Add	_____	_____
	Remove	_____	_____
4)	Change	_____	_____
	Add	_____	_____
	Remove	_____	_____
5)	Change	_____	_____
	Add	_____	_____
	Remove	_____	_____
6)	Change	_____	_____
	Add	_____	_____
	Remove	_____	_____

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

September 1, 2022

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

9/1/2022
Dated _____

Signature _____
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Daniel Turner

(Typed or printed name of person signing)

President

(Title of person signing)