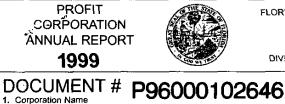
KINGSLY HOLDING CORP.

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90177 004 ***150.00

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Principal Place of Business Mailing Address							(INC. INC. INC. INC. INC. INC. INC. INC.		aitā 11514 aiti)
1 SE 3RD AVE 1 SE 3RD AVE			Έ							
28TH FL 28TH FL MIAMI FL 33131 MIAMI FL 33131							DO NOT WRITE IN THIS SPACE			
US US							3. Date Incorporated or Qualifed			
**							12/20/1996			
2. Principal P	lace of Business	2a. Mailing A	ddress				4. FEI Number		TA	pplied For
26							65-0720273		N	lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, e				etc.						Additional
22 27							5. Continuate of Change Booker			tequired
City & State City & S			, State				6. Election Campaign Financing			May Be
23		28		C+			Trust Fund Contribution			to Fees
Zip	Country	Zip	[-	Country	′		8. This corporation owes the current	t year Inta	ingible Yes	XZNo
24	9. Name and Address of Curro	29		10			Personal Property Tax. 10. Name and Address of New Re	nistered A		SESINO.
	5. Name and Address of Curr	ent Registered Age		81	l i	Name	10. Nume and Page 33 of 110 Wiles	gistorea	.90	
AMERICAN INFORMATION SERVICES, INC.										
1 SE 3RD AVE				82	1 5	Street Addres	ss (P.O. Box Number is Not Acceptabl	e)		
28TH FL				83	╁					
MIAMI FL 33131					L			·		<u></u>
					(City		FL	85 Zip	Code
l office or r	egistered agent, or both, in the Stat	e of Florida. Such c	hange was aut	horized by	the	named corporation	ration submits this statement for the purish board of directors. I hereby accept	irpose of the	changing its tment as re	s registered egistered
agent. I a	m familiar with, and accept the oblig	gations of, Section 6	07.0505, Florid	da Statutes	3.					
SIGNATURE	Signature, typed or printed name of registered at	pent and title if applicable	(NOTE: R	Registered Age	nt sie	ignature required v	when reinstaling)	DATE		
12.		AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	CERS AN	DIRECTO	ORS IN 12
TITLE	DPS		DELETE	1.1 TITLE					Change	Addition
NAME	LOPEZ, A			12 NAME						
STREET ADDRESS	1 SE 3RD AVE, 28TH FL			1.3 STREE	T AD	ODRESS				
CITY-ST-ZIP	MIAMI FL 33131			1.4 CITY-S	T-Z	<u>ż</u> IP				
₹ITLE			DELETE	2.1 TITLE					☐ Change	☐ Addition
NAME	· · ·	-		2.2 NAME						
STREET ADDRESS				2.3 STREE	TAD	DORESS				
CITY-ST-ZIP				2. 4 CITY-3	ST-Z	ZIP				F== 4 -1-111 -
TITLE		L] DELETE	3.1 TITLE					☐ Change	Addition
NAME				3.2 NAME						
STREET ADDRESS				3.3 STREE		1				
CITY-ST-ZIP				3.4. CITY-5	ST-Z	ZIP	<u></u>			
TITLE		Ĺ	DELETE	4.1 TITLE					☐ Change	Addition
NAME				4. 2 NAME						
STREET ADDRESS	4.			4.3 STREE						
CITY-ST-ZIP			1 DELETE	4.4 CITY-S	T-Z	<u>'IP</u>			Change	☐ Addition
TITLE		L	DELETE	5.1 TITLE 5.2 NAME					∟ change	Addition
NAME				5.2 NAME 5.3 STREE	TAD	UDBESS				
STREET ADORESS				5.3 STREE						
CITY-ST-ZIP				54 CH 1- S	1-2	·II				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.9 (3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

DELETE

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

AGUSTIN LOPEZ M., PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Change

☐ Addition