

2/12/2019

F9900001388

Division of Corporations  
Florida Department of State  
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Fax Number : (850)617-6380

From: Account Name : URS AGENTS LLC  
Account Number : I20150000127  
Phone : (800)567-4397  
Fax Number : (800)567-4398

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Email Address: rhenderson@urscompliance.com

REGISTERED AGENT CHANGE

THE NORTH AMERICAN MISSION BOARD OF THE SOUTHERN BAP

S TALLENT

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TALLAHASSEE, FL

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** THE NORTH AMERICAN MISSION BOARD OF THE SOUTHERN BAPTIST CONVENTION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** F99000001388

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:

Jill Owen  
Name of Contact Person

THE NORTH AMERICAN MISSION BOARD OF THE SOUTHERN BAPTIST CONVENTION, INC.  
Firm/Company

4200 NORTH POINT PARKWAY  
Address

ALPHARETTA, GA 30022  
City/State and Zip Code

rhenderson @urscompliance.com ✓  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy Clark at 800 567-4397  
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

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of GA in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: THE NORTH AMERICAN MISSION BOARD OF THE SOUTHERN BAPTIST CONVENTION, INC.
- 2. The principal office address: 4200 NORTH POINT PARKWAY ALPHARETTA, GA 30022
- 3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 03/05/1999 Document number: F99000001388

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

NRAI CORPORATE SERVICES  
1200 SOUTH PINE ISLAND RD  
PLANTATION, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

URS AGENTS, LLC  
3458 LAKESHORE DRIVE  
P.O. Box NOT acceptable  
TALLAHASSEE, FL 32312

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 TALLAHASSEE, FL  
 STATE DEPARTMENT OF REVENUE

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

George McCallum George McCallum, Secretary  
Signature of an officer or director Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

K. Bishop 02-08-19  
Signature of Registered Agent Date

If signing on behalf of an entity:  
Kanetha Bishop, Asst. Secretary  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
 CR2B045 (03/12)