

**NO2383**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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C LEWIS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Day Star Word Ministries, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** \_\_\_\_\_

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:

Heidi Dixon  
Name of Contact Person

Day Star Word Ministries, Inc.  
Firm/Company

228 Myrtle Brook Bend  
Address

Ponte Vedra Beach, FL 32081  
City/State and Zip Code

dixon1001@comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Doyle Dykes at (423) 618-0542  
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

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Day Star Word Ministries, Inc.
- 2. The principal office address: 228 Myrtle Brook Bend, Ponte Vedra Beach, FL 32081
- 3. The mailing address (if different): Same as above
- 4. Date of incorporation/qualification: \_\_\_\_\_ Document number: N02383
- 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)

Leroy H. Nail  
5609 Timugwana Rd., Jacksonville, FL 32210


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

Heidi Dixon  
228 Myrtle Brook Bend  
P.O. Box NOT acceptable  
Ponte Vedra Beach, FL 32081

FLORIDA  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
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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.

 Doyle C. Dykes - President  
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.

Heidi Dixon 6-1-2015  
Signature of Registered Agent Date

If signing on behalf of an entity:  
 \_\_\_\_\_  
Typed or Printed Name

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