5/24/2021

## Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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H210002076083ABC-

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone

: (307)200-2803

Fax Number

: (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

C1	Address:			
emaı.	AUUTPSS.			

## REGISTERED AGENT CHANGE LIVING STREAM MINISTRIES INC

Certificate of Status	0		
Certified Copy	0		
Page Count	02		
Estimated Charge	\$35.00		

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## \*STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH FOR CORPORATIONS

statement of cho	unge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida St a organized under the laws of the State of $\stackrel{\text{re}}{=}$ registered agent, or both, in the State of Fl	rsla	this		
1. The name of	the corporation: LIVING STREAM	MINISTRIES INC				_
		e, Unit 102 111, Clovis, CA 93611	<del></del>	<del></del>	<del></del>	-
3. The mailing a	address (if different):					-
4. Date of incor	poration/qualification: 08/25/2014	Document number: N1400000	7867			
	d street address of the current regis rtment of State: (If resigned, enter	tered agent and registered office on file with resigned)	n the			
	Vera Beckering					
	3039 N. Rocky Point Dr. W					
	Tampa, FL 33607			ALL	2021	
6. The name and street address of the new registere (if changed):		ed agent (if changed) and /or registered office	ce	LAHASSE	2021 KAY 24	1)
	Registered Agents Inc.			7152	70 ZK	
	7901 4th St N STE 300			LOSI STAT	2:2	
P.O. Box NOT acceptable				D A	Ö	
	St. Petersburg FL 3370					
The street address changed will	ess of its registered office and the libe identical.	street address of the business office of its	register	red agent.	,	
Such change was authorized by the	as authorized by resolution duly a he board, or the corporation has bo	dopted by its board of directors or by an of een notified in writing of the change.	ficer so	o		
Vera Be	ckering	Vera Beckering, PD				
I further agree performance of	to comply with the provisions of a my duties, and I am familiar with	Printed or typed name and title ent and agree to act in this capacity. ill statutes relative to the proper and comp and accept the obligation of my position of to reflect a change in the registered office ified in writing of this change.	lete is regis addres	stered ss, I		
Bee Han	•	05/24/2021				
Sig	nature of Registered Agent	Date				
If signing on be	chalf of an entity:					
Bill Havre						
T	yped or Printed Name					

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