N97000002582

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COVER LETTER

TO: Amendment Section Division of Corporations

_{Surrect.}Watoto Child Care Ministry, Inc

Name of Corporation

DOCUMENT NUMBER. M97000002582

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:

Valerie King

Name of Contact Person

Watoto Child Care Ministry, Inc.

Firm/Company

13617 N Florida Ave

Address

Tampa, FL 33613

City/State and Zip Code

valerie@watoto.com

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

For further information concerning this matter, please call:

Valerie King

,813

482-4747

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

statement of ch	provisions of sections 607,0502, 617,0502, 6 ange is submitted for a corporation organized for to change its registered office or registered	d under the laws of the State of Florida	_	
 The name of The principa 	the corporation: Watoto Child Care Notes address: 13617 N Florida Ave	Ministry, Inc. e, Tampa, FL 33613		
3. The mailing	address (if different): Same			
4. Date of incor	rporation/qualitication; 5/8/97	Document number: N970000	00,72	
5. The name an	nd street address of the current registered ager artment of State: (If resigned, enter resigned)	nt and registered office on file with the		
	Eugene Stutzman			
	258 Crystal Grove Blvd			
	Lutz, FL 33548			
6. The name an (if changed):		if changed) and /or registered office	JEURI JIVI TIEN	
	Eugene Stutzman		77.7	
	20121 Bending Creek Place P.O. Box NOT acceptable			
	P.O. Box NOT according to the Property of the	eptable	ANG	
The street addr	ress of its registered office and the street add	fress of the business office of its registered ag	٠٠٠	
Such change wanthorized by t	ras authorized by resolution duly adopted by the board, or the corporation has been notified	its board of directors or by an officer so ed in writing of the change.		
<u> Walley</u>	ure of an officer of disserts	/alerie King CFO		
I further agrée performance of agent. Or, if il	of the appointment as registered agent and a to comply with the provisions of all statutes	gree to act in this capacity. Evelative to the proper and complete opt the obligation of my position as registered a change in the registered office address. I	I	
English Signature	gnature of Registered Agent	3/9/17	_	
If signing on bo	ehalf of an entity:			
Watoto Ch	nild Care Ministry, Inc.			
	Lyped or Printed Name			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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