

N96000000922

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EXAMINER

**BANKRUPTCY LAW FIRM  
\* OF LANSING J. ROY, P.A. \***

1710 Shadowood Lane, Suite 210, Jacksonville, FL 32207

Telephone: (904) 391-0030 FAX: (904) 391-0031

Web site: [www.JacksonvilleBankruptcy.com](http://www.JacksonvilleBankruptcy.com)

E-mail: [information@lansingbanklaw.com](mailto:information@lansingbanklaw.com)

**Christopher R. DeMetros, Esquire  
Kevin B. Paysinger, Esquire  
William B. McDaniel, Esquire**

**Lansing J. Roy, Esquire, of Counsel  
Joshua A. Cossey, Esquire, of Counsel**

August 30, 2013

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: The Cathedral Church of the Resurrection, Inc.  
Document No. N96000000922

Dear Sir or Madam:

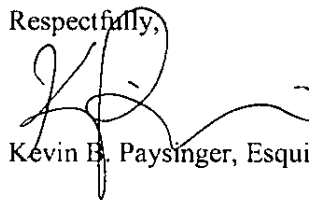
Enclosed for filing are the following documents for the corporation referenced above:

1. Statement of Change of Registered Office or Registered Agent or Both for Corporations
2. Amended & Restated Articles of Incorporation
3. Certificate Designating Registered Agent.

Also enclosed is a check in the amount of \$70.00 which represents the filing fees for the Amended & Restated Articles of Incorporation (\$35.00) and the Change of Registered Agent (\$35.00).

Please let me know if you need anything else.

Respectfully,



Kevin B. Paysinger, Esquire

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Cathedral Church of the Resurrection, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N96000000922

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:

David R. Simpson  
Name of Contact Person

The Cathedral Church of the Resurrection, Inc.  
Firm/Company

6701 SW 25th Street  
Address

Miramar, FL 33023  
City/State and Zip Code

Sarajanerz@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David R. Simpson at ( 954 ) 983-5808  
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: The Cathedral Church of the Resurrection, Inc.
2. The principal office address: 6701 SW 25th Street, Miramar, Florida 33023
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 02/19/1996 Document number: N96000000922
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)

W. MORGAN SPEER

5882 LAS COLINAS CIR.

LAKE WORTH FL 33463

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

Kevin B. Paysinger

1710 Shadowood Lane, Suite 210

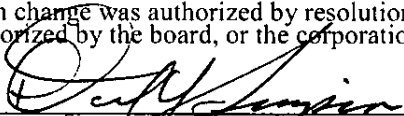
P.O. Box NOT acceptable

Jacksonville, FL 32207

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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.

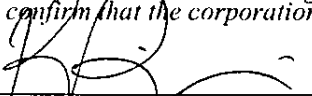
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

David R. Simpson, President

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.*

  
\_\_\_\_\_  
Signature of Registered Agent

8/30/13  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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