	Current Mai	ling Address:			
	14205 NORT TAMPA, FL	TH FLORIDA AVENUE 33613			
FEI Number: 82-4433484				Certificate of Status Desired:	Yes
Name and Address of Current Registered Agent:					
	EVANS, DONAL 14205 NORTH I TAMPA, FL 336	FLORIDA AVENUE			
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.					
	SIGNATURE	: DONALD J. EVANS		12/	/19/2018
		Electronic Signature of Registered Agent			Date
		Electronic Signature of Registered Agent			Dale
	Officer/Dired				Dale
	Officer/Dired		Title	DP	Dale
		ctor Detail :	Title Name	DP OGU, EUGENE APOSTLE	Dale
	Title	ctor Detail : DST			Dale
	Title Name	ctor Detail : DST EVANS, DONALD J REV	Name	OGU, EUGENE APOSTLE 14205 NORTH FLORIDA AVENUE	Dale
	Title Name Address	ctor Detail : DST EVANS, DONALD J REV 14205 NORTH FLORIDA AVENUE	Name Address	OGU, EUGENE APOSTLE 14205 NORTH FLORIDA AVENUE	Dale
	Title Name Address City-State-Zip:	ctor Detail : DST EVANS, DONALD J REV 14205 NORTH FLORIDA AVENUE TAMPA FL 33613	Name Address	OGU, EUGENE APOSTLE 14205 NORTH FLORIDA AVENUE	Date
	Title Name Address City-State-Zip: Title	ctor Detail : DST EVANS, DONALD J REV 14205 NORTH FLORIDA AVENUE TAMPA FL 33613 DV	Name Address	OGU, EUGENE APOSTLE 14205 NORTH FLORIDA AVENUE	Date
	Title Name Address City-State-Zip: Title Name	ctor Detail : DST EVANS, DONALD J REV 14205 NORTH FLORIDA AVENUE TAMPA FL 33613 DV UKAZIM, NGOZI 5380 SUMIT LODGE DRIVE	Name Address	OGU, EUGENE APOSTLE 14205 NORTH FLORIDA AVENUE	Date

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DONALD J. EVANS

Electronic Signature of Signing Officer/Director Detail

FILED Dec 19, 2018 **Secretary of State** CR5913567238

DIRECTOR

Date

## 2018 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N17000002527

Entity Name: ARM OF HOPE, INC.

## **Current Principal Place of Business:**

14205 NORTH FLORIDA AVENUE TAMPA, FL 33613