## 713885

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Soldiers of the Cross of Christ, Inc.

Name of Corporation

OCUMENT NUMBER. 713885

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:

Yanny J. Hidalgo

Name of Contact Person

Hidalgo Law Firm, P.A.

Firm/Company

655 W Flagler st suite 201

Address

Miami, FL 33130

City/State and Zip Code

veronikaoficinacentral@hotmail.com

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

For further information concerning this matter, please call:

Yanny J. Hidalgo

, 305

846-9192

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 cha	provisions of sections 607.0302, 617.0302 nge is submitted for a corporation organi r to change its registered office or registe	ized under the laws of the State of Flo	orida		
1. The name of t	he corporation: Soldiers of the Cro	ess of Christ Church, Inc.			
	office address: 641 W Flagler Stre				
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 12/29/1967	Document number: 713885			
	street address of the current registered ag tment of State: (If resigned, enter resigned		the		
	Omar Mendiondo				
	6415 NW 201 ST HIALEAH, FL 33015				
6. The name and (if changed):	The name and street address of the new registered agent (if changed) and /or registered office. (if changed):				
	Hidalgo Law Firm, P.A.				
	655 W Flagler Street suite 201 Miami, FL 33130				
	P.O. Box NOT acceptable				
The street addre	ss of its registered office and the street a be identical.	address of the business office of its r	egistered agent,		
Such change wa authorized by th	s authorized by resolution duly adopted e board, or the corporation has been not	by its board of directors or by an offified in writing of the change.	ficer so		
Maye	e of an other or diffector	Miguel Rodriguez/ Preside	ent		
performance of agent. Or. if thi	the appointment as registered agent and o comply with the provisions of all statumy duties, and I am familiar with and ac s document is being filed merely to reflet the corporation has been notified in	ecept the obligation of my position a ct a change in the registered office i	s registered		
	idalga	02/26/2018			
	nature of Registered Agent	Date			
If signing on bel	•				
Yanny J. Hi	ped 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 \* \* \*