# 724680

| (Re                                     | equestor's Name)   |           |
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| (Ĉi                                     | ty/State/Zip/Phone | #)        |
| PICK-UP                                 | ☐ WAIT             | MAIL      |
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I ALBRITTON

#### **COVER LETTER**

TO: Amendment Section Division of Corporations

NEW MOUNT CALVARY MISSIPHARY BAPTIST CHURCH, SUBJECT: INCORPORATED, OF MIAMI, FLORIDA

Name of Corporation

724680

DOCUMENT NUMBER:

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:

# Reverend Bernard Lang

Name of Contact Person

# **New Mount Calvary MB Church**

Firm/Company

#### 7103 NW 22ND AVENUE

Address

### MIAMI, FLORIDA 33147

City/State and Zip Code

# langbernard@yahoo.com

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

For further information concerning this matter, please cali:

Reverend Bernard Lang

954 632

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



# FLORIDA DEPARTMENT OF STATE Division of Corporations

July 3, 2018

REV. BERNARD LANG 7103 NW 22ND AVENUE MIAMI, FL 33147

SUBJECT: NEW MOUNT CALVARY MISSIONARY BAPTIST CHURCH,

INCORPORATED, OF M IAMI, FLORIDA

Ref. Number: 724680

We have received your document for NEW MOUNT CALVARY MISSIONARY BAPTIST CHURCH, INCORPORATED, OF M IAMI, FLORIDA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

8:58

Letter Number: 918A00013758

May 18, 2018

REVEREND BERNARD LANG 7103 NW 22ND AVENUE MIAMI, FL 33147

SUBJECT: NEW MOUNT CALVARY MISSIONARY BAPTIST CHURCH,

INCORPORATED, OF M IAMI, FLORIDA

Ref. Number: 724680

We have received your document for NEW MOUNT CALVARY MISSIONARY BAPTIST CHURCH, INCORPORATED, OF M IAMI, FLORIDA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 018A00010476

www.sunbiz.org

TO DO DOY COOK WILL BY 11 COOK

# 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 ofFLORIDA   |
| in order to change its registered office or registered agent, or both, in the State of Florida.  |
| THE name of the corporation: THE NAME OF MIAMI, FLORIDA 33147  2. The principal office address: 7103 NW 22ND AVENUE, MIAMI, FLORIDA 33147  |
| 2. The principal office address: 7103 NW 22ND AVENUE, MIAMI, FLORIDA 33147   |
|  |
| 3. The mailing address (if different): P.O. BOX 471175 NW Miami, Florida 33247 1175  |
| 4. Date of incorporation/qualification: 10/27/1972 Document number: 724680   |
|  |
| 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)   |
| MICHAEL T. BUTLER SR.  |
| 13341 SW 256 STREET  |
| 13341 SW 256 STREET  PRINCE TON, FLORIDA 33032  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  |
| 6. The name and street address of the new registered agent (if changed) and /or registered office.   |
| (if changed):  |
| (if changed):  REVEREND BERNARD LANG   |
| 7/03 NW 22nd Avenue Miami, Florida 33147   |
| P.O. Box NOT acceptable  |
|  |
| 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.  |
| Willie J. Walter Chair Man  Signature of an officer or director  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. |
| Rev. Bernand E. Signature of Registered Agent Date   |
| Signature of Registered Agent Date   |
| If signing on behalf of an entity:   |
| Typed 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 \* \* \*