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(Re	equestor's Name)			
(Ac	ldress)			
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PICK-UP	☐ WAIT	MAIL		
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Kimmel & Batson



ROBERT R. KIMMEL Florida Bar Board Certified Marital and Family Law E-mail: bob@kimbat.com SUSAN CROCKETT BATSON Florida Bar Board Certified Wills, Trusts & Estates E-mail: susie@kimbat.com

June 24, 2015

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

Dear Sirs/Madams:

We enclose a cover letter, \$35.00 fee (law firm check), the completed "Statement of Change of Registered Agent", and a copy of the minutes from the appropriate meeting reflecting the change being approved by the corporation.

We ask that you make the appropriate changes in the State records relating to this corporation and that you contact the undersigned immediately if there are any questions or problems.

Robert R. Kimmel

RRK/sbb Enclosures

COVER LETTER

Inc.

TO: Amendment Section Division of Corporations					
SUBJECT: Mc Ilwain Memorial Proby	tein Church of Persacha, Fla,				
Name of Corp	poration				
DOCUMENT NUMBER: 730181					
The enclosed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to	the following:				
Robert R. Kimme	-				
Name of Contact	et Person				
Me II wa					
Firm/Comp	pany				
715 N- B.	rylen St.				
Address Persocolo Ha City/State and 2	o.				
606 @ Kimbat, com					
E-mail address: (to be used for futu	re annual report notification)				
For further information concerning this matter, please call	: :				
Robert R. Kinnel	at (\\ \sqrt{50} \ \ \sqrt{3\left\lambda} = \ 75\left(\sqrt{75\left\lambda} \) Area Code & Daytime Telephone Number				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Departme	ent 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

	- · · · · · · · · · · · · · · · · · · ·	02, 617.0502, 607.1508, or 617.1508, Florida ation organized under the laws of the State of			
		ce or registered agent, or both, in the State of			
1. The name of	the corporation: McIlwa	in Memorial Resbyterior Chu	rch of Pasacula, Fla,		
1. The name of the corporation: Mc Ilwain Memorial Resbyteriar Church of Pasacola, Fla., 2. The principal office address:					
3. The mailing a	address (if different):				
4. Date of incorp	poration/qualification:	Document number:			
		registered agent and registered office on file venter resigned)			
	Coules >	lates (resigned)	-		
	1220 E.BL	OUNT STREET	2015 - 2015		
	PENSACOLA,	LOUNT STREET FL 32503	2015 JUN 29		
6. The name and (if changed):	Persoca 6	Eistered agent (if changed) and for registered of the second of the seco	office RECEIVED AND STATE		
The street address changed will	ess of its registered office and	d the street address of the business office of	- its registered agent,		
Such change wa	as authorized by resolution du	uly adopted by its board of directors or by an has been notified in writing of the change.	ı officer so		
felill	Live of an officer or director	Robert R. Kinn Printed or typed name and t			
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registere	ed agent and agree to act in this capacity. s of all statutes relative to the proper and co with and accept the obligation of my position werely to reflect a change in the registered offern notified in writing of this change. The 24 Date	mplete on as registered fice address, l		
If signing on be	chalf of an entity:				
	Typed or Printed Name				

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