734325

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: IMMANUEL PRESBYTERIAN CHURCH OF MIAMI, INC Name of Corporation

DOCUMENT NUMBER: 734325

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:

Alexandra Guerra		
Name of Contact Person		
Crossbridge Church/ IMMANUEL PRESBYTERIAN CHURCH OF M		
Firm/Company		
7700 N Kendall Drive STE 300-M		
Address		
Miami, FL 33156	2023	i y i v
City/State and Zip Code		
ALE@CROSSBRIDGEMIAMI.COM		-
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:	PH 12: 40	
Alexandra Guerra at $\left(\frac{786}{1000000000000000000000000000000000000$	News	_
Name of Contact Person Area Code & Daytime Teleph	ione inumber	

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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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: ______

2. The principal office address: 7700 NORTH KENDALL DRIVE 300-M

MIAMI, FL 33156

3. The mailing address (if different):

Document number: 734325 4. Date of incorporation/qualification: 11/12/1975

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)

> JORGE E REYNARDUS 11225 SW 99 CT

MIAMI, FL 33176

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

DOUGLAS TIMMONS		023 2	•••••
7700 Nort	th Kendall Drive STE 300-M	-	
- <u></u> +	P O. Box NOT acceptable	CO	
Miami, FL 33156		קי	-
The street address of its re as changed will be identic	egistered office and the street address of the business office of its registered al.	l agent,	
Such change was authoriz authorized by the board o	The corporation has been notified in writing of the change. $\mathcal{P} = \mathcal{P} \in \mathcal{P} \setminus \mathcal{A}$. Thus $\mathcal{P} = \mathcal{P} \in \mathcal{A}$	-	

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.

Signature of Registered Agent

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314