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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Halifax Urban Ministries Inc		
Name of Corporation		
DOCUMENT NUMBER: 759556		
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:		
Sue Ellen Jackson		
Name of Contact Person		
Halifax Urban Ministries		
Firm/Company		
215 Bay St		
Address		
Daytona Beach Florida 32114		
City/State and Zip Code		
SueEllen@halifaxurbanministries.org		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Mel Harper 386-252-0156		
Name of Contact Person at (		
Enclosed is a \$35.00 check made payable to the Department of State. —		
Mailing Address: Amendment Section  Street Address: Amendment Section		
Division of Corporations Division of Corporations		
P.O. Box 6327 Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is submitted for	ns 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, this a corporation organized under the laws of the State of Florida tered office or registered agent, or both, in the State of Florida.
1. The name of the corporation:	lalifax Urban Ministries
2. The principal office address:	
3. The mailing address (if different):	
4. Date of incorporation/qualificatio	n: 8/10/81 Document number: 754556
5. The name and street address of the Florida Department of State: (If re	e current registered agent and registered office on file with the esigned, enter resigned)
Mark Geallis	;
215 Bay St	
Daytona Bea	ach, Florida 32114
6. The name and street address of the (if changed):	e new registered agent (if changed) and /or registered office $\mathbb{R}$
Sue Ellen Ja	ackson
215 Bay St	
Daytona Bead	P.O. Box NOT acceptable ch, Florida 32114
The street address of its registered os changed will be identical.	office and the street address of the business office of its registered agent,
Such change was authorized by reseauthorized by the board, or the corp	olution duly adopted by its board of directors or by an officer so oration has been notified in writing of the change.
Anne Wans	Anne Evans, Board Chair
Signature of an officer or director  I hereby accept the appointment as I further agree to comply with the p performance of my duties, and I am agent. Or, if this document is being hereby confirm that the corporation	Printed or typed name and title registered agent and agree to act in this capacity. provisions of all statutes relative to the proper and complete a familiar with and accept the obligation of my position as registered if filed merely to reflect a change in the registered office address, I i has been notified in writing of this change.
Filler	10-31-17
Signature (6) Registered Agent	Date
If signing on behalf of an entity:	
Sue Ellen Jackson Typed or Printed Name	<del></del>

Make CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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