847421

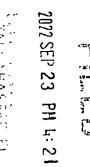
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



000394010050

09/23/22--01014--015 **35.00



COVER LETTER

TO:

TO:	Amendment Section Division of Corporations	
SUBJI Name	ECT: The Way International, Inc. of Corporation	
DOCU	JMENT NUMBER: 847421	
The en	closed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning thi	s matter to the following:
Millie '	Vergara	
Name -	of Contact Person	
The Wa	ay International	
Firm/C	Company	
P.O Bo	x 328	
Addres	SS	
New K	noxville, Ohio 45871	
City/Si	tate and Zip Code	
	legalservices@theway.org	
E-mai	l address: (to be used for future annua	al report notification)
For fur	ther information concerning this matter,	please call:
Millie	· Vergara	at (419)753-2523
	Name of Contact Person	at (419)753-2523 Area Code & Daytime Telephone Number
Enclos	ed is a \$35.00 check made payable to the	e Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	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

	·	9502, 617.0502, 607.1508, or 617.1508, Flo oration organized under the laws of the Stal			
		ffice or registered agent, or both, in the Stat	,		
1. The name of t	he corporation:The Way	International, Inc.			
		ville Road, New Knoxville, Ohio 45871			
3. The mailing a	ddress (if different): P.O.	Box 328, New Knoxville Ohio 45871			
4. Date of incorp	oration/qualification: 11/	Document number: 84	7421		
	I street address of the curre tment of State: (If resigned	nt registered agent and registered office on f , enter resigned)	ile with the		
	Bill Berryhill				
	2916 Rollins Street		2022 SEP 23 SEALT AHA	SMT III I	
	Melbourne FL 32901		EP 23	1	
6. The name and (if changed):	street address of the new	registered agent (if changed) and /or register	: A		
	Lyndon Sumlin		2 · · · · · · · · · · · · · · · · · · ·	*0.55*	
	817 Huntsville Road				
P.O. Box NOT acceptable					
	Gotha FL 34734	W			
The street addre	ess of its registered office be identical.	and the street address of the business office	e of its registered ag	ent,	
Such change wa authorized by th	s authorized by resolution e board, or the corporation	duly adopted by its board of directors or be naised and in writing of the change	by an officer so e.		
Vann 1	W Edward	Vernon W. Edwards, President	ent		
Signatur	e of an officer or director	Printed or typed name	e and title	_	
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as regist o comply with the provisi d I am familiar with and c ng filed merely to reflect o been notified in writing o	ered agent and agree to act in this capacity ons of all statutes relative to the proper an occept the obligation of my position as regi ochange in the registered office address, I of this change.), d complete performa stered agent. Or, if hereby confirm that	ince this the	
As	Challe	- 9/9/22			
// Vsign	nature of Registered Agent	Date		_	
It signing on be	half of an entity:				
1	yndon Sumlin				
Ty	ped or Printed Name				

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