## F05000006035

(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:		

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DIVISION OF CORPORATION
25 SEP -3 PH 4: 41

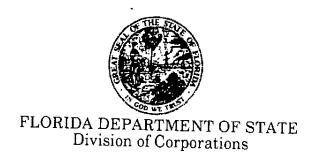
Ra Change

SEP 1.2 2025 D. CUSHING

## **COVER LETTER**

Division of Corporations		
SUBJECT: Summit Bible C Name of Corporation	hurch. Inc.	
DOCUMENT NUMBER: FO50000	106035	
The enclosed Statement of Change of Registered Offic	ce/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter	<del></del>	
Name of Contact Person	· · · · · · · · · · · · · · · · · · ·	
Firm/Company	hurch, the.	
1901 S. John Young Pi	KWy #110	·
Kissinmee FL 34	74	
City/State and Zip Code		
E-mail address: (to be used for future annual repo	ort notification)	
For further information concerning this matter, please	call:	
Name of Contact Person	at (407) 483-1689 Area Code & Daytime Telephone N	Vumber 9
Enclosed is a \$35.00 check made payable to the Depa		SECKE IA
Mailing Address: Amendment Section	Street Address: Amendment Section	-3 PM
Division of Corporations	Division of Corporations	- <del>1</del>
P.O. Box 6327	The Centre of Tallahassee	- <b>1</b>
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

CR2E045 (04/13)



August 8, 2025

ANDREW C. OSAKWE SUMMIT BIBLE CHURCH, INC. 1901 S JOHN YOUNG PARKWAY, STE 110 KISSIMMEE, FL 34741

SUBJECT: SUMMIT BIBLE CHURCH, INC.

Ref. Number: F05000006035

We have received your document for SUMMIT BIBLE CHURCH, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Parntership, but your entity is a Corporation. Please complete and return the enclosed blank form(s).

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.

Diane Cushing Operations Manager A

Letter Number: 125A00017663



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

rursuant 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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Summit Poible Character Land
2. The principal office address: 1901 S. John Jourg Pkwy #110 Kissimmer FL. 34741
3. The mailing address (if different):
4. Date of incorporation/qualification: 10-18-2005 Document number: F050000 6035
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)
Adebayo Olumuyiwa J.
1901 S. John Young Pkwy #110
Kissimmee, FL 34741
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Andrew C. Osakwe
1901 S. John Joung PKwy #110 23 EVS
Kissimmer FL-34741
The street address of its registered office and the street address of the business office of its registered gentless 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.
Signature of an officer or director  ANDREW C. DSAKWE PRESIDENT
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.
001/8/2025
Signature of Registered Agent Date  If signing on behalf of an entity:
:
Typed or Printed Name

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