

F070000001022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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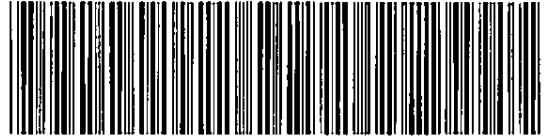
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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McAFEE & TAFT

A PROFESSIONAL CORPORATION

8TH FLOOR • TWO LEADERSHIP SQUARE
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AMY POYNER
PARALEGAL

WRITER DIRECT
(405) 552-2392
FAX (405) 235-0439
amy.poyner@mcafeetaft.com

December 13, 2023

VIA FEDERAL EXPRESS

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Statement of Change of Registered Office or
Registered Agent or Both for Corporations – Life
Covenant Church, Inc.

Statement of Change of Registered Office or
Registered Agent or Both for Corporations –
Life.Church Operations, LLC

Ladies and Gentlemen:

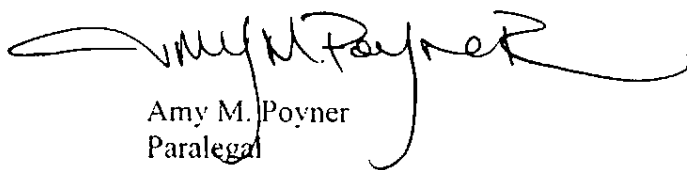
Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both
for Corporations for Life Covenant Church, Inc., along with our check in the amount of \$35.00.

Also, enclosed please find a Statement of Change of Registered Office or Registered Agent or
Both for Corporations for Life.Church Operations, LLC along with our check in the amount of \$25.00.

Please file and return to me in the enclosed self-addressed stamped envelope.

If there are any questions or concerns, please contact me at 405-552-2392. Thank you for your
assistance.

Very truly yours,



Amy M. Poyner
Paralegal

Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Life Covenant Church, Inc.
Name of Corporation

DOCUMENT NUMBER: F07000001022

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:

Amy M. Poyner

Name of Contact Person

McAfee & Taft A Professional Corporation

Firm/Company

8th Floor, Two Leadership Square, 211 North Robinson

Address

Oklahoma City, OK 73102

City/State and Zip Code

amy.poyner@mcafeetaft.com and legal@life.church

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy Poyner

Name of Contact Person

at (405) 552-2392

Area Code & Daytime Telephone Number

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

**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 Oklahoma in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Life Covenant Church, Inc.
2. The principal office address: 4600 East 2nd Street, Edmond, OK 73034
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/22/07 Document number: F07000001022
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)

Corporate Creations Network, Inc.

801 US Highway 1

North Palm Beach, FL 33408

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

C T Corporation System

1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, FL 33324

The street address of its registered office and the street address of the business office of its registered agent, 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.

Amy Nickel

Signature of an officer or director

Amy Nickel Manager

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.

Laura Broderick

Signature of Registered Agent

Laura Broderick
Assistant Secretary

Date

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

CR2E045 (04/13)

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SECRETARY OF STATE
TALLAHASSEE, FL