

L13000122514

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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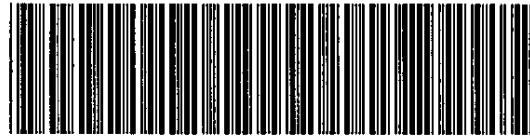
(Business Entity Name)

(Document Number)

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14 AUG 29 PM 4:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Covenant Blessed Ministries, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Indi Fratarcangelo-K
Name of Person

Covenant Blessed Ministries, LLC
Firm/Company

5697 Sandstone DR
Address

Pace, FL 32571
City/State and Zip Code

Godnamedjesus.com@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Indi Fratarcangelo-K at (850) 994-0141
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Covenant Blessed Ministries, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

5697 Sandstone DR.
Pace, FL 32571

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

5697 Sandstone DR.
Pace, FL 32571

3. 05 Sep 2013 4. L13000122514
Date of filing/registration in Florida Document number

5. (a) CORPORATION SERVICE COMPANY

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

1201 HAYS STREET
TALLHASSEE, FL 32301

(b) DUCKER + COMPANY, Inc.

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

6825 OAK STREET
NEW Registered Office Address:

MILTON, FL 32570

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Indi Fratamansele
Signature of a member or authorized representative of a member

Indi Fratamansele
Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

John Ducker
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

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14 AUG 29 PM 4:30
TALLAHASSEE, FL
SECRETARY OF STATE