NO300000 908

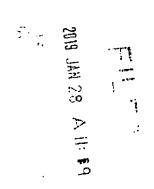
		<u> </u>
(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(24	omood Linky Hair	,
(Do	ocument Number)	
(00	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		;
		:

Office Use Only



900323780119

正有工作的 1977 · 1987 · ★4 7。



FEB 0.4 29() T. **LEMIEUX**

COVER LETTER

TO: Amendment Section Division of Corporations Morning Star Ministry of Cocoa Beach, Inc. Name of Corporation N03000000908 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: Vincent P. Marino Name of Contact Person Firm/Company 401 Holman Rd Address Cape Canaveral, Fl 32920 City/State and Zip Code privatevpmarino@netscape.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Vincent P. Marino Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address:

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.		
The name of t The principal	he corporation: Morning Star Ministry of Cocoa Beach, Inc office address: 401 Holman Rd, Cape Canaveral, Florida. 32920		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 02/01/2003 Document number: N0300000908		
	street address of the current registered agent and registered office on file with the treet of State: (If resigned, enter resigned)		
	Elijah Adams (Resigned)		
	3374 Lost Canyon Place		
	Cocoa, Florida 32926		
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office		
	Vincent P Marino		
	401 Holman Rd ⊆ 👸		
•	P.O. Box NOT acceptable Cape Canaveral, Fl. 32920		
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.		
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.		
Elgin D Signatur	Elijah D. Adams For an officer or director Frinted or typed name and title		
I further agree to performance of agent. Or_if thi	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete or duties, and I am familiar with and accept the obligation of my position as registered s document is being filed merely to reflect a change in the registered office address. I that the corporation has been notified in writing of this change.		
Sign	est P. Marine 1/2/2019 Date Date		
\bigcirc	nalf of an entity:		
Ту	ped or Printed Name		

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