N03000006897

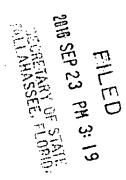
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Amendment Section **Division of Corporations** Recovery Ministries of the Episcopal Chruch SUBJECT Name of Corporation N03000006897 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: Larry Norton Name of Contact Person Firm/Company 133 N Pompano Beach Blvd, Apt 1510 Address Pompano Beach, FL 33062 City/State and Zip Code Lnorton.norton@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: .arry Norton Name of Contact Person 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Recovery Ministries of the Episcopal Church , Tnc .
2. The principal office address: 781 Maple Road Buffalo, NY 14221
3. The mailing address (if different): P.O. Box 40764 Memphis, TN 38174
4. Date of incorporation/qualification: August 12, 2003 Document number: NO3000006897
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) Lane, Steven
Lane, Steven
133 N. Pampano Blvd
بن المحادث ال
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Norton, Larry
133 N Pompano Beach Blvd, Apt 1510
P.O. Box NOT acceptable Pompano Beach, FL 33062
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.
Signature of an officer or director Lisa Kirby, President 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.
September 13, 2016
Signature of Registered Agent 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 (03/12)