## N0400001236

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SECRETARY OF STATE

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## **COVER LETTER**

SUBJECT: New Agent (Name of Corporation)
DOCUMENT NUMBER: N0400001236
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:
Reverendo Jesus Cruz (Name of Contact Person)
<u>Iglesia Movimiento de Fe Jesus Manantial d</u> e Vida, Inc. (Firm/Company)
PO Box 216  (Address)  Interlachen, Florida 32148 (City/State and Zip Code)  For further information concerning this matter, please call:
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (386), 684 - 4958  (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Amendment Section Division of Corporations

TO:

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

statement of change is su	ns of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ubmitted for a corporation organized under the laws of the State of nge its registered office or registered agent, or both, in the State of Florida.
	pration: IGLESIA MOVIMIENTO DE FE JESUS MANANTIAL DE VIDA, IN
2. The principal office ac	ddress: PO Box 216
	Interlachen, Florida 32148
3. The mailing address (i	if different): Same
4. Date of incorporation/	qualification: 1/30/04 Document number: N04000001236
5. The name and street as Florida Department of	ddress of the current registered agent and registered office on file with the fState:    CO/AS Mencaro - Resign 50
	81
(if changed):	ael Reyes 8357 SW105 PC Ocala, F1. 34481  (P.O. Box, NOT acceptable)  Address of the new registered agent (if changed) and /or registered office  ACR AHET ARY  SERY  P. C. P. C. Box NOT acceptable)
	registered office and the street address of the business office of its registered agent, tical.  rized by resolution duly adopted by its board of directors or by an officer so, or the corporation has been notified in writing of the change.
authorized by the board	, or the corporation has been notified in writing of the change.    Compared to the change   Com
I further goree to compl	ointment as registered agent and agree to act in this capacity.  ly with the provisions of all statutes relative to the proper and complete performance amiliar with and accept the obligation of my position as registered agent. Or, if this merely to reflect a change in the registered office address, I hereby confirm that the otified in writing of this change.  The provided Agent (Ifate)
If signing on behalf of a	Reyes

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