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SECRETARY OF STATE

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T. BROWN

COVER LETTER

TO: Amendment Division	ent Section of Corporations		
SUBJECT:	B + L Ministries Name of Corpo	JAC pration	
DOCUMENT N	UMBER: NO4000002	222	
The enclosed Stat	tement of Change of Registered Office/Ag	gent and fee are submitted for filing.	
Please return all o	correspondence concerning this matter to	the following:	
	Teresa Thom Name of Contact		
B+ L Ministiles Inc			
	3024 Anna Address	dale Circle	
Brandon Horida 33511 City/State and Zip Code			
BobArnold@gmx, net E-mail address: (to be used for future annual report notification)			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
	ame of Contact Person	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	Street Address: Amendment Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: B + L Ministries, Inc.
2. The principal office address: 2511 Way Cross Ave EUSTIS Florida 32726
3. The mailing address (if different): PO Box 508 Eu(+is FL 32 727
4. Date of incorporation/qualification: $\frac{2/25/2069}{}$ Document number: $\frac{109000002222}{}$
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)
Teresa Thomas 3 SEC
2511 Way Cross Ave
Euris Florida 32727
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
3024 Amadale Circle P.O. Box NOT acceptable Brandon Horida 33511
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 Signature of an officer or director 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. **Solution** **Complete Provision of the property of the proper
Signature of Registered Agent Day 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)