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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJI	ECT: Enlightened Livind Ministries, Inc. (Name of Corpora	ation)	
DOCU	MENT NUMBER: N0500009196		
The en	closed Statement of Change of Registered Office/Ager	nt and fee are submitted for filing.	
Please	return all correspondence concerning this matter to the	e following:	
	Bonnie W. Stewart (Name of Contact F	Person)	
	Enlightened Living Ministries, In (Firm/Compan)		
	10615 110th Ave. (Address)		
	Largo, FL. 33773 (City/State and Zip	Code)	
For fur	ther information concerning this matter, please call:		
Bonni	le W. Stewart at (Name of Contact Person)	727) 735-8712 (Area Code & Daytime Telephone Number)	
Enclose	ed is a \$35.00 check made payable to the Department of	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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)