

NO600000 3035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

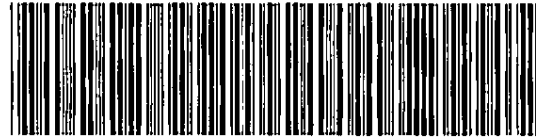
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SECRETARY OF STATE
FALL ADMINISTRATION

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: New Dimensions Cathedral of Faith Church of the Nazarene, Inc.
Name of Corporation

DOCUMENT NUMBER: N06000003035

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:

Luke Benjamin

Name of Contact Person

New Dimensions Cathedral of Faith Church of the Nazarene

Firm/Company

3237 Brookasher Drive

Address

Jacksonville, FL 32218

City/State and Zip Code

LBEN85@GMAIL

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luke Benjamin

Name of Contact Person

at

347 972 3287

(446) 404-3528

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
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: New Dimensions Cathedral of Faith Church of the Nazarene
2. The principal office address: 320 Clark Road, Jacksonville, FL 32218
3. The mailing address (if different): P.O. Box 28724, Jacksonville, FL 32226
4. Date of incorporation/qualification: _____ Document number: N06000003035
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)

Vincent F. Foster (resigned)

10954 Crichton Road

Jacksonville, FL 32221

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Rev. Luke Benjamin

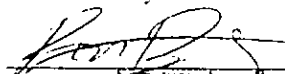
3237 Brookasher Drive

P.O. Box NOT acceptable

Jacksonville, FL 32218


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

Ronald Luke Benjamin officer
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.


Signature of Registered Agent

Dec - 14 - 2021
Date

If signing on behalf of an entity:

Ronald Luke Benjamin
Typed or Printed Name

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

FILED
2021 DEC 16 PM 8:19
SECRETARY OF STATE
TALLAHASSEE, FL 32304