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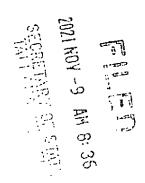
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SHEMMA MINISTRIES, INC. Name of Corporation
DOCUMENT NUMBER: N06000005518
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:
BETH A BAXTER
Name of Contact Person
ERDMAN AUTOMOTIVE
Firm/Company
4650 HIGHWAY 520
Address
COCOA, FL 32926
City/State and Zip Code
BBAXTER@MIKEERDMANMOTORS.COM
E-mail address: (to be used for future annual report notification)
·
For further information concerning this matter, please call:
BETH BAXTER 21 (321) 453-1313
Name of Contact Person at (321) 453-1313 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

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

in orc	hange is submitted for a corporation der to change its registered office of	n organized under the laws of the State of r registered agent, or both, in the State of I	FLORIDA Florida.	
1. The name o	f the corporation: SHEMMA MINIS	STRIES, INC.		
	al office address: 4650 HIGHWAY 5			
3. The mailing	address (if different):			
4. Date of inco	prporation/qualification: 05/22/2006	Document number: N060000	005518	
5. The name ar	nd street address of the current regis artment of State: (If resigned, enter t	stered agent and registered office on file un	ith the	
	KEVIN P. MARKEY, P.L.			
	380 S COURTENAY PARKWAY.	. SUITE A	-	
	MERRITT ISLAND, FL 32952		-	
6. The name an (if changed):	ad street address of the new registere	ed agent (if changed) and /or registered of	-8 9	
	BETH A BAXTER		7. F. 19.	
	4650 HIGHWAY 520			
	COCOA, FL 32926	P.O. Box. NOT acceptable	- 30 80 6 - 30 86	
The street address changed will	ess of its registered office and the s	street address of the business office of its	registered agent.	
		dopted by its board of directors or by an open notified in writing of the change.		
Signature of an efficer or director		MICHAEL ERDMAN, DIRECTOR	ICHAEL ERDMAN, DIRECTOR	
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered age to comply with the provisions of al ad I am familiar with and accept th ng filed merely to reflect a change s been notified in writing of this ch	nt and agree to act in this capacity. I statutes relative to the proper and comp e obligation of my position as registered	plete performance agent. Or, if this confirm that the	
	a Start	10/26/2021		
_	half of an entity:	Date		