

| (Re                                     | questor's Name)    |           |
|---|--------------------|-----------|
| (Ad                                     | dress)             |           |
| (Ad                                     | ldress)            |           |
| (Cit                                    | ty/State/Zip/Phone | #)        |
| PICK-UP                                 | ☐ WAIT             | MAIL      |
| (Bu                                     | isiness Entity Nam | ne)       |
| (Do                                     | ocument Number)    |           |
| Certified Copies                        | _ Certificates     | of Status |
| Special Instructions to Filing Officer: |                    |           |
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R. WHITE

## **COVER LETTER**

| Division of C          | corporations  |  |
|------------------------|---|--|
| SUBJECT:               | Embracing God Mini<br>Name of Cor   | stries, Inc.   |
| DOCUMENT NUM           | BER: N07000003099   | · · · · · · · · · · · · · · · · · · ·  |
| The enclosed Statem    | ent of Change of Registered Office/   | Agent and fee are submitted for filing.  |
| Please return all corr | espondence concerning this matter t   | o the following:   |
| _                      | Stephen L. Carpenter Name of Conta  | net Person   |
| _                      | Carpenter & Lewis PLI<br>Firm/Com   |  |
| _                      | 10413 Kingston Pike, S<br>Addre   | Suite 200  |
|                        | Knoxville, TN 37922   |  |
| _                      | City/State and  | Zip Code   |
|                        | stephen@carpenterlew  | is.com   |
| E                      | E-mail address: (to be used for fut   | ure annual report notification)  |
| For further informati  | on concerning this matter, please ca  | II:  |
| -                      | • Carpenter of Contact Person   | at ( 865 ) 690-4997  Area Code & Daytime Telephone Number  |
| Enclosed is a \$35.00  | check made payable to the Departm   | ent 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 |

TO:

Amendment Section

## 'STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of change                       | ovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this e is submitted for a corporation organized under the laws of the State of Florida change its registered office or registered agent, or both, in the State of Florida.  |  |  |
|---|---|--|--|
| 1. The name of the                        | corporation: Embracing God Ministries, Inc.   |  |  |
| 2. The principal off                      |   |  |  |
|   | Knoxville, TN 37934   |  |  |
| 3. The mailing addr                       | ress (if different): 11124 Kingston Pike, Suite 119, #400   |  |  |
|   | Knoxville, TN 37934   |  |  |
| 4. Date of incorpora                      | ration/qualification: 03/26/2007 Document number: N07000003099  |  |  |
| 5. The name and str                       | reet address of the current registered agent and registered office on file with the ent of State: (If resigned, enter resigned)   |  |  |
| М   | IONTALVAN, RICARDO ニューロー・ディー・ディー・ディー・ディー・ディー・ディー・ディー・ディー・ディー・ディ   |  |  |
| 64  | 6470 Sw 9Th Place   |  |  |
| N   | orth Lauderdale, FL 33068   |  |  |
| 6. The name and str<br>(if changed):      | reet address of the new registered agent (if changed) and /or registered office   |  |  |
| <u>In</u>                                 | Corp Services, Inc.   |  |  |
| 17  | 17888 67th Court North  |  |  |
| Lo  | P.O. Box NOT acceptable  oxahatchee, FL 33470   |  |  |
| The street address as changed will be     | of its registered office and the street address of the business office of its registered agent, identical.  |  |  |
| Such change was a authorized by the h     | authorized by resolution duly adopted by its board of directors or by an officer so coard, or the corporation has been notified in writing of the change.   |  |  |
| Signature of                              | Jayson Knox, Chairman of the Board Printed or typed name and title  |  |  |
| I further agrée to c<br>performance of my | e appointment as registered agent and agree to act in this capacity.  comply with the provisions of all statutes relative to the proper and complete  duties, and I am familiar with and accept the obligation of my position as registered  locument is being filed merely to reflect a change in the registered office address, I  t the corporation has been notified in writing of this change. |  |  |
| MM  | した人人 June 22, 2015  |  |  |
| Signatur                                  | re of Registered Agent Date   |  |  |
| If signing on behal                       | If of an entity:  |  |  |
| Natalie Bales Typed                       | on behalf of Incorp Services, Inc.  |  |  |

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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