N080000 10754

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

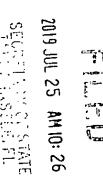
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COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: Idols Aside Minsitries, Inc.					
Name of Corporation					
DOCUMENT NUMBER: NO800010754					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for fili	ng.				
Please return all correspondence concerning this matter to the following:					
Mark Wright					
Name of Contact Person					
Idols Aside Ministries, Inc.					
221 Main Street					
Address					
Auburndale, FL 33823					
City/State and Zip Code					
mark@idolsaside.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Mark Wright863 _514-9555	5				
Name of Contact Person Area Code & Daytime Telepho	one Number				
Enclosed is a \$35.00 check made payable to the Department of State.					
Mailing Address: Amendment Section Street Address: Amendment Section					
Division of Corporations Division of Corporations Division of Corporations	3				
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center C	Timala				

Tallahassee, FL 32301

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

statement of cha	nge is submitted for a corporation of	.0502, 607.1508, or 617.1508, Florid rganized under the laws of the State or rgistered agent, or both, in the State o	of Florida	
1. The name of t	ne corporation: Idols Aside Mi	nistries, Inc.		
2. The principal	office address: 214 Orange Stale, FL 33823	reet, Suite D		
3. The mailing a	ddress (if different):			
4. Date of incorp	oration/qualification: 11/24/20	08 Document number: N08	000010754	
	street address of the current register tment of State: (If resigned, enter res	red agent and registered office on file signed)	e with the	
	Mark D. Wright, Jr.		20 	
	214 Orange Street, Suite	D	760 TI	
	Auburndale, FL 33823		2019 JUL 25 SECRE 133	
6. The name and (if changed):	street address of the new registered	agent (if changed) and /or registered		
	221 Maint Street			
P.O. Box NOT acceptable Auburndale, FL 33823				
as changed will	ss of its registered office and the st be identical.	reet address of the business office o		
authorized by th	s authorized by resolution duly adde board, or the corporation has been	pted by its board of directors or by notified in writing of the change.	an officer so	
Jan Simatri	e of an officer or director	Mark Wright, Preside		
I hereby accept I further agree i performance of agent. Or, if the	the appointment as registered agen o comply with the provisions of all my duties, and I am familiar with a	t and agree to act in this capacity. statutes relative to the proper and c nd accept the obligation of my posit reflect a change in the registered o	complete tion as registered	
_	half of an entity:	Date		
Ту	ped or Printed Name			

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