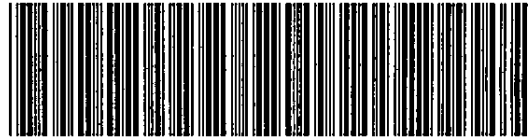


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(Requestor's Name)

(Address)

(Address)

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T. LEMUEUX

CA



April 6, 2018

Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

Please find the attached "cover letter" for the purpose of changing the agent titled, "President" for Family Life Church of God, Inc. We recently underwent a leadership change with the resignation of President Gregory D. Roberts and the appointment of C. Glen Thigpen as president.

Thank you for your help! If you have any questions or find this form/information to be inadequate, please let us know asap so that we may resolve the matter as quickly as possible.

Blessings,

A handwritten signature in black ink, appearing to read "C. Glen Thigpen". The signature is fluid and cursive, with a large, sweeping flourish at the end.

C. Glen Thigpen  
Lead Pastor

Attachment: Cover Letter

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: Family Life Church of God Inc  
Name of Corporation

DOCUMENT NUMBER: N10000011841

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:

Pastor Glen Thigpen  
Name of Contact Person

Family Life Church of God Inc  
Firm/Company

17259 SW Archer Rd  
Address

Archer, FL 32618  
City/State and Zip Code

PastorGlen@FamilyLifeCOG.ORG  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pastor Glen Thigpen at ( 352 ) 210-3354  
Name of Contact Person 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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Family Life Church of God
2. The principal office address: 17259 SW Archer Rd Archer, FL 32618
3. The mailing address (if different): (Same as above)

4. Date of incorporation/qualification: 12/27/2010 Document number: N10000011841

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)
Gregory D. Roberts (resigned)
16550 SW 134th Ave
Archer, FL 32618

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
C. Glen Thiipen
16550 SW 134th Ave
Archer, FL 32618

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TALLAHASSEE, FLORIDA

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: Douglas MEElnoy
Printed or typed name and title: Douglas MEElnoy Treasurer

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: [Signature]
Date: 4-6-2018

If signing on behalf of an entity:
Typed or Printed Name

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