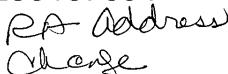
N11000000185

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Amendment Section Division of Corporations

TO:

UBJECT: Changing Hearts Food Mission Name of Corporation			
DOCUMENT NUMBER: <u>N // 000000 / 85</u>			
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:			
Cynthia Wolinski Name of Contact Person			
Changing Hearts Food Mission Firm/Company			
Firm/Company			
2223 SW 41 ST LANE Address			
City/State and Zip Code			
City/State and Zip Code			
Changing hearts Foodmission @ Gmail. Com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (904) 233-9534 Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			
Amendment Section Amendment Section Division of Comparations Division of Comparations			
Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314



RECEIVED 14 APR -9 PH 12: 32

FLORIDA DEPARTMENT OF STATE (C. PARTING M. P. 1877) Division of Corporations

March 28, 2014

Cynthia Wolinski Changing Hearts Food Mission 2223 SW 41st Lane Gainesville, FL 32608

SUBJECT: CHANGING HEARTS FOOD MISSION, INC.

Ref. Number: N11000000185

We have received your document for CHANGING HEARTS FOOD MISSION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 914A00006679

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
1. The name of the corporation: CHanging Hearts Food Mission
1. The name of the corporation: CHANGING HESATS FOOD MISSION 2. The principal office address: 2223 SW 415T LANC GAINESUILLE, FI 3260B
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 1/5/2011 Document number: N1/000000 185
 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)
KAOKU; I'C TN 37932
Knoxville, TN 37932
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): 2223 SW 4137 LAAR GAINES L. IR FI 32608 P.O. Box NOT acceptable
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 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 comporation has been notified in writing of this change.
hereby confirm that the comporation has been notified in writing of this change. Signature Registered Agent If signing on behalf of an entity:
S S :

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

Typed or Printed Name