113000006628

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





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SECRETARY OF STATE
ALLAHASSEF, FIRE

DES OI 2014

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Providence and mercy in Actions Ministries Inc

DOCUMENT NUMBER: N13000006628

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:

Luis E Hernandez

Name of Contact Person

Providence and Mercy in Action Ministries Inc

Firm/Company

11108 Summer Drive

Addres

Tampa, Florida 33624

City/State and Zip Code

providenceandmercy@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis E. Hernandez

,,813

579-0834

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

		617.0502, 607.1508, or 617.1508, Florida Statutes,	this
	-	n organized under the laws of the State of Florida	<u></u>
	6 6	r registered agent, or both, in the State of Florida.	
1. The name of t	he corporation: Providence and	d Mercy in Action Ministries Inc	
2. The principal	office address: 11108 Summer	· Drive	
Tampa, Flo			
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: July 22/2	013 Document number: N1300000662	<u> </u>
	d street address of the current registment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	Roberto Mallea - Resigned		d. d
	5009 Pennsbury Drive		14 NOV 10 SECRETAR TALLAHASS
	Tampa, Florida 33624		
6. The name and (if changed):	1 street address of the new register	red agent (if changed) and /or registered office	OF STATE
	Esperanza Aguilar		RIPE
	3601 Landings Way Drive Apt LO6		
	Tampa, Florida 33624	Box NOT acceptable	
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its registe	ered agent,
		adopted by its board of directors or by an officer speen notified in writing of the change.	
<u>مو</u> د	Same (Luis E Hernandez - President	
Signatu	re of an officer or director	Printed or typed name and title	
I further agree performance of agent Or if th	to comply with the provisions of fmy duties, and I am familiar wit	gent and agree to act in this capacity. all statutes relative to the proper and complete h and accept the obligation of my position as reg v to reflect a change in the registered office addre otified in writing of this change.	istered ess, I
1	gul	October 27, 2014	
Sig	nature of Registered Agent	Date	
If signing on be	ehalf of an entity:		
Esperanza A	guilar yped or Printed Name	_	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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