N13000009436

(Requestor's Name)
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(100.000)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Oce Community Chu	rch inc.	
SUBJECT: Core Community Church Inc. Name of Corporation		
DOCUMENT NUMBER: N13000009434		
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:		
Steve Miller Name of Contact Person		
Name of Contact Person	i i	
Name of Contact Person Con Community Church Inc. Firm/Company		
1955 N Krome Ave		
Address	2.	
Homestead, FL 33030 City/State and Zip Code		
City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Ci i Acilia		
tive viller	at (305) 247- 6544 Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	
Colored Section 1 and the Comment of Section		
Enclosed is a \$35.00 check made payable to the Department of State.		
16		
Mailing Address: Amendment Section	Street Address:	
Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Tallahassee, FL 32303	

CR2E045 (04/13)

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

Fursiant 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 $\frac{100000}{100000000000000000000000000000$
1. The name of the corporation: Ove Community Church Inc.
2. The principal office address: 1955 N Krome Ave
Homestead, FL 33030
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/17/2013 Document number: N/300009436
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)
<u>Carla Cubero</u> (resigned)
900 Cardinal Pl
Home; tead, FL 33035
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Steve Miller
The street address of its registered office and the street address of the business office of its registered agen as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer sp authorized by the board, or the corporation has been notified in writing of the change.
Steve Miller, Pasto
Signature of airbiticer 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 performant of my duties, and I am familiar with and accept the obligation of my position as registered agence (Or. if the 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 Date
If signing on behalf of an entity:
Steve Miller Typed or Printed Name

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