

N14000001248

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C. LEWIS  
AUG 6 2014  
EXAMINER

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Upper Room Ministries Inc.  
Name of Corporation

DOCUMENT NUMBER: N14 00000 1248-1/1

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:

Lawrence Julian  
Name of Contact Person

Upper Room Ministries  
Firm/Company

108 SE Soneto CRT  
Address

Port St Lucie Fla 34983  
City/State and Zip Code

donmjulian @ bell-south.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lawrence Julian at ( 772 ) 521-2501  
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Upper Room Ministries Inc  
2. The principal office address: 108 SE Soneto Crt  
Port St Lucie, Fla 34983  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: Feb 11<sup>th</sup> 2014 Document number: N14000001248

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)

United States Corporation Agents Inc  
13302 Winding Oaks Crt Suite A  
Tampa Florida 33612

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Lawrence Julian  
108 SE Soneto Crt  
P.O. Box NOT acceptable  
Port St Lucie, Fla 34983

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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.

Lawrence Julian  
Signature of an officer or director

Lawrence Julian President  
Printed or typed name and title

*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.*

Lawrence Julian  
Signature of Registered Agent

7-18-14  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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