N15000004509

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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SECRETARY OF STATE
SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: ATTITUDE BAPTIST CHURCH OF ORLANDO INC

Name of Corporation

DOCUMENT NUMBER: N15000004509

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:

DIEGO SAMPAIO

Name of Contact Person

COMPANY COMBO, LLC

Firm/Company

8751 COMMODITY CIRC UNIT 5

Address

ORLANDO, FL 32819

City/State and Zip Code

INFO@COMPANYCOMBO.COM

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

For further information concerning this matter, please call:

DIEGO SAMPAIO

.866

428-2030

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of FLORIDA are to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: ATTITUDE BAPTIST CHURCH OF ORLANDO INC	
2. The principal	office address: 9600 WEST COLONIAL DRIVE OCOEE, FL 34761	
3. The mailing a	address (if different): 9600 WEST COLONIAL DRIVE OCOEE, FL 34761	
	A1/20/00/15	
4. Date of incorporation/qualification: 04/30/2015 Document number: N15000004509		
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	US TAX CONSULTING INC	
5401 S. KIRKMAN RD STE #135		
	ORLANDO, FL 32819	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	COMPANY COMBO, LLC	
	8751 COMMODITY CIRCLE STE 5	
	P.O. Box NOT acceptable	
	ORLANDO, FL, 32819	
	ess of its registered office and the street address of the business office of its registered agent, 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.		
SALLEY	SALLEH ALI CADER Printed or typed name and title	
I hereby accept	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
100n	nature of Registered Agent O9 - 14 - 2016 Date	
•	nature of Registered Agent Date	
If signing on behalf of an entity:		
DIEGO SAI	WPAIO yped or Printed Name	

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