

N15000004633

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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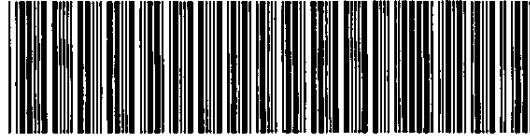
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Alliance Marital Prep, Inc  
Name of Corporation

**DOCUMENT NUMBER:** N1500000 4633

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:

Robin W. Smith  
Name of Contact Person

Alliance Marital Prep, Inc  
Firm/Company

841 Prudential Drive Ste. 1200  
Address

Jacksonville, FL 32207-0000  
City/State and Zip Code

alliance marital prep@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robin W. Smith at ( 904 ) 415-7418  
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: Alliance Marital Prep, Inc.
- old address 2. The principal office address: 2272 Lookout Landing Dr  
Fleming Island, FL 32003
3. The mailing address (if different): P.O. Box 8085  
Fleming Island, FL 32006
4. Date of incorporation/qualification: 5/4/2015 Document number: N15000004633
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)

Carolyn Potts  
2272 Lookout Landing Drive  
Fleming Island, FL 32003

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

Robin W. Smith  
841 Prudential Drive Suite 1200  
P.O. Box NOT acceptable  
Jacksonville, FL 32207-0000

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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.

Carolyn Potts  
Signature of an officer or director

6/17/15  
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.

Robin W. Smith  
Signature of Registered Agent

June 17, 2015  
Date

If signing on behalf of an entity:

Robin W. Smith  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (03/12)