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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Rise Up Young Church, Inc
DOCUMENT NUMBER: N 1500006534
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:
Nancy M Powers Name of Contact Person
Rise Up Young Church, Inc
9485 Regency Square Blud, Ste 116
Jacksonville, FL 32225 City/Stak and Zip Code
Powersn Gatt.net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Nancy Poures 253-5353
Name of Contact Person at (904), 353-5353 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
1. The name of the corporation: Rise Up Young Church, Inc. 2. The principal office address: 9485 Regency Square Blvd., Ste 110 Jacksonville FL 32225
3. The mailing address (if different):
4. Date of incorporation/qualification: 4\30\15 Document number: N15000066534
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)
Nancy M Powers
1050 Talleyrand Ave
Vacksonville, FC 32206
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Nancy M Powers
9485 Regency Square Blud., Ste 110
Vacksonville, FL 32225
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.
Signature of an officer or director 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.
Name 7/2/18
If signing on behalf of an entity:
Typed 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 * * *