

N15000009283

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SEC. OF STATE  
TALLAHASSEE, FLORIDA

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APR 21 2016

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Jacksonville Community Family Fellowship, Inc  
Name of Corporation

**DOCUMENT NUMBER:** N15000009283

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:

Juliya Moody  
Name of Contact Person

Bookkeeping & Accounting of Florida  
Firm/Company

4946 Herton Drive  
Address

Jacksonville FL 32258  
City/State and Zip Code

bookkeepingandaccounting@comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juliya Moody at ( 904 ) 333-1041  
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: The Jacksonville Community Family Fellowship, I
2. The principal office address: 6451 Beach Blvd Jacksonville FL 3
3. The mailing address (if different): same
4. Date of incorporation/qualification: 9/24/15 Document number: N1500000922
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.  
CHEYENNE MUSELER

13302 WINDING OAK CT  
TAMPA, FL 33612

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

Juliya Moody, Bookkeeping & Accounting CP FL  
4946 Horton Drive  
P.O. Box NOT acceptable  
JACKSONVILLE FL 32258

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.

Howard Gunter  
Signature of an officer or director

HOWARD GUNTER  
Printed or typed name and title  
PRESIDENT

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.

Juliya Moody  
Signature of Registered Agent

4/18/16  
Date

If signing on behalf of an entity:

Juliya Moody  
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

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