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STORT TARY OF STATE
JEVISION OF CORPORATION

JUL 8 2016

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: M. Charly Bartist Church, INC.		
DOCUMENT NUMBER: NISODOD/05/D		
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:		
Name of Contact Person M. Charity Batts Firm/Company P.D. Box 370 Address Address Flouid 32016 City/State and Zip Code (Work 10 Woldstream, Net E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
TORNNE WALER at 904 845-4368 Name of Contact Person Area Code & Daytime Telephone Number		
Name of Contact Person Area Code & Daytime Telephone Number		
England in a \$25.00 aheat, made mayahla ta the Donartment of State		

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 in order to change its registered office or registered agent, or both, in the State of Florida.
In order to change its registered office of registered agent, or some in the state of riorida.
1. The name of the corporation: Mt Charity Daptist Church INC
2. The principal office address: 552042 US Hwy I
Ailliard Florida 32046
3. The mailing address (if different): P. D. Box 370
Hillard, Florida 32046
4. Date of incorporation/qualification: 16-27-15 Document number: N 150880/05/0
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)
BUSINESS FILMY INCORPURATED = ==
1700 S PNE ISLAND Rd 5 PE
TO CO
Plantation, F1 33324 3
6. The name and street address of the new registered agent (if changed) and /or registered office
Lit changed!
Mt. Chaety Baptist Church / Joanne Walker
28135 Ramble LANE Walker
P.O Box NOT acceptable
Hillhed, Florida 32046
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.
I hereby accept the appointment as registered agent and agree to act in this capacity.
I hereby accept the appointment as registered agent and agree to act in this capacity,
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.
hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent Date
If signing on behalf of an entity:
To significant of all childy.
Typed or Printed Name

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