

1160000031A9

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 27 2010

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: St. Johns Classical Academy, Inc.

Name of Corporation

DOCUMENT NUMBER: N16000005129

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:

Amy Miller

Name of Contact Person

St. Johns Classical Academy, Inc.

Firm/Company

114 Canova Rd

Address

Fleming Island, FL 32003

City/State and Zip Code

amy.miller@stjca.org

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

For further information concerning this matter, please call:

Amy Miller

Name of Contact Person

at (904) 5913333

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: St. Johns Classical Academy, Inc.
2. The principal office address: 114 Canova Road

3. The mailing address (if different): 114 Canova Road

4. Date of incorporation/qualification: 5/2016 Document number: N16000005129

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)

Amy Miller
1575 island breeze point
Fleming Island, FL 32003

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

Amy Miller
114 Canova Road
P.O. Box NOT acceptable
Fleming Island, FL 32003


STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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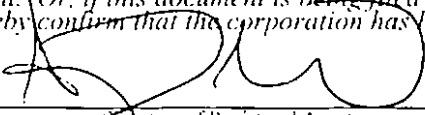
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.


Signature of an officer or director

Amy Miller
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.


Signature of Registered Agent

8/21/18
Date

If signing on behalf of an entity:

Typed or Printed Name

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