N 1600005899

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	ST
Certified Copies Certificates of Status	APR
Special Instructions to Filing Officer:	
	1





600312318596

04/26/18--01013--016 **35.00

S TALLENT APR 27 2018

18 APR 26 PH 12: 32

RIPICH

COVER LETTER

Amendment Section

TO:

Division of Corporations
SUBJECT: 600'S GRACE MINISTRIES OF NORTH FLORIDA, INC. Name of Corporation
DOCUMENT NUMBER: N/600005899
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:
Roy THOMAS TREMBIY Name of Contact Person
6005 GRACE Ministrices OF North Florida, INC. Firm/Company
194 Yelvington ROAD
Address
EAST PALATKA, FLORIDA, 32/3/ City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Roy TRIMBly Name of Contact Person at (386) 315-2620 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

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: 6005 GRACE MINISTRIES OF NORTH FLORIDA, INC.
2. The principal office address: 194 Yalvington RI, E. PALATKA, FL., 32131
3. The mailing address (if different):
4. Date of incorporation/qualification: 6/10/16 Document number: N 16 00000 5899
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 Abents, INC.
13302 WINDING OAKS BLUD, STE A
TAMPA, FL., 33612
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
ROY THOMAS TREMBLY
194 Yelvington Road P.O. Box NOT acceptable
EAST PALATKA, Fl., 32131
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.
Roy T. TREMBly P Signature of an officer or director Signature of an officer or director
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 4-23-18 Date
If signing on behalf of an entity:
Roy THOMAS TREMBLY Typed or Printed Name

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