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D20 AUG 26 PM 3: 35

JU 10/09/20

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Change of Registered Agent Name of Corporation		
DOCUMENT NUMBER: N20000001414		
The enclosed Statement of Change of Registered Office	ee/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Amanda Griffis		
Name of Contact Person		
New Hope Church of Macelenny, Inc.		
Firm/Company		
5622 Tranquil Lane		
Address	· · · · · · · · · · · · · · · · · · ·	
Macelenny, Fl 32063		
City/State and Zip Code	<del></del>	
mandy512@yahoo.com		
E-mail address: (to be used for future annual repo	rt notification)	
For further information concerning this matter, please	call:	
Amanda Griffis	at (904 ) 708-8738	
Name of Contact Person	at (904 )708-8738  Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Depar	tment of State.	
Mailing Address: Amendment Section	Street Address:	
	Amendment Section	
Division of Corporations	Division of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta unge is submitted for a corporation organized under the laws of the State of <mark>Flo</mark> er to change its registered office or registered agent, or both, in the State of Flo	rida	uis 	-
1. The name of	the corporation: New Hope Church of Macclenny, Inc.			
	office address: 5849 Lauramore Road			_
3. The mailing a	address (if different): 5622 Tranquil Lane Macelenny, Fl 32063			_
	poration/qualification: 02/03/2020 Document number: N200000014	114		
	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)	the		
	Amy M. Conner, Secretary			
	16439 Crews Road			
	Glen St. Mary, Fl 32040		1 0202	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	LANASY VANASKA	2020 AUG 26	
	Amanda K. Griffis, Secretary	OF S	PM	<u> </u>
	5622 Tranquil Lane	, FL	ယ္ ယ	
	P.O. Box NOT acceptable	נידו	വ	
	Macclenny, FI 32063			
The street address changed will	ess of its registered office and the street address of the business office of its r	egistere	d ager	ıt,
Such change wa authorized by t	as authorized by resolution duly adopted by its board of directors or by an of he board, or the corporation has been notified in writing of the change.	ficer so		
Rav J.	Control of an officer or director  Tre of an officer or director  Printed or typed name and title	, <b>P</b>		-
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and completed I am familiar with and accept the obligation of my position as registered aing filed merely to reflect a change in the registered office address, I hereby is been notified in writing of this change.	lete perj igent. ( confirm	forman Or, if th that th	ce us ve
	haturd of Registered Agent S 17 2020	<u> </u>		-
If signing on be	chalf of an entity:			
T	'yped or Printed Name			

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