## Na1 000007271

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	me)
(Do	ocument Number)	1
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	. <u>-</u>	

Office Use Only



000370290710

RA change

07/23/21--01015--018 \*\*35.00



AUG 1 1 2021 A RAMSEY

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Living Hope Church Inc Name of Corporation		
DOCUMENT NUMBER: N21000007271		
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
Joshua Komis Name of Contact Person		
Living Hope Church Inc Firm/Company		
300 3rd Street NW Address		
Winter Haven, FL 33881 City/State and Zip Code		
E-mail address: (to be used for future annual report	rt notification)	
For further information concerning this matter, please	call:	
Joshua Komis Name of Contact Person	at (863 ) 299-7797 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	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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 Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida rockange its registered office or registered agent, or both, in the State of Florida.
	the corporation: Living Hope Church Inc.
2. The principal	office address: 300 3rd Street NW Winter Haven, FL 33881
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 6/16/2021 Document number: N21000007271
	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Daniel Moesbrugger
	300 3rd Street NW
	Winter Haven, FL 33881
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Joshua Komis
	300 3rd Street NW
	P.O. Box NOT acceptable
	Winter Haven, FL 33881
The street addre as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Signatur	sauthorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.  Ed Rendrick Director
I hereby accept I further agree t of my duties, and document is beit corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Sign	nature of Registered Agent  7/18/2021  Date
	nalf of an entity:
- <del>-</del>	ped or Printed Name
Ту	ped 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