N21000007585

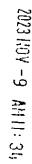
(Requestor's Name)					
(Address)					
(Add)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Eddiness Entry (Valley)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Will.					

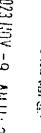
Office Use Only



200418522922

11/09/23--01014--004 **35.00





TO: Amendment Section Division of Corporations's SUBJECT: PASTORS UNITED AS ONE INC Name of Corporation **DOCUMENT NUMBER:** N21000007585 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: CLARENCE GREEN Name of Contact Person PASTORS UNITED AS ONE INC Firm/Company P.O. BOX 1807BROOKSVILLE, FL 34605 Address P.O. BOX 1807BROOKSVILLE, FL 34605 City/State and Zip Code pastorsunitedas1@gmail.com E-mail address: (to be used for future annual report notification)

Enclosed is a \$35.00 check made payable to the Department of State.

For further information concerning this matter, please call:

Name of Contact Person

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Area Code & Daytime Telephone Number

CR2E045 (04/13)

CLARENCE GREEN

COVER LETTER

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

statement of cha	nge is submitted for a	corporation organi	2, 607.1508, or 617.1508 ized under the laws of the red agent, or both, in the	State of FLOR	IDA
1. The name of t	he corporation: PAST	ORS UNITED AS O	NE INC		
2. The principal	office address: 600 W	OOD DRIVE			
		P.O. BOX 1807, BRO	OKSVILLE, FL 34605		
The maning a	adress (ii different): _	6/22/2021	Document number:	N21000007585	
	I street address of the timent of State: (If resi		ent and registered office l)	on file with the	
	BILL POPE, JR.			1 122 - 123 1 - 12 - 123	2023
	600 WOOD DRIVE			,, ·	[] [] . [] 2023 HOV -9
	BROOKSVILLE, FL	34601	· <u> </u>	· .	
6. The name and (if changed):	street address of the	new registered agen	t (if changed) and /or reg	gistered office	AH 11: 34
	CLARENCE GREEN				
	600 WOOD DRIVE				
	P.O. Box NOT acceptable				
	BROOKSVILLE FLO	JRIDA 34601		···	
The street address changed will	ess of its registered of be identical.	Tice and the street a	ddress of the business of	office of its regi	stered agent,
Such change wa authorized by th	is authorized by resolute board, of the corpo	ution duly adopted ration has been not	by its board of directors ified in writing of the ch	s or by an office nange.	er so
Vinson	A l		VINSON PARNELL, CI	EO	
Signatu	e of the officer of director			d name and title	
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as root comply with the product of a manifer with a familiar with a filed merily to refuse to notified in write	egistered agent and ovisions of all statu and accept the obliquet a change in the ting of this change.	agree to act in this cap tes relative to the prope gation of my position as registered office addre.	pacity, or and complete registered ager ss, I hereby con	performance it. Or, if this firm that the
* Sig	nature of Registered Agent	Juli	— Da	ite	
If signing on be	half of an entity:				
T	ped or Printed Name				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)

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