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Florida Department of State
Division of Corporations
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLahassee, FLORIDA

**REGISTERED AGENT CHANGE
ZION'S ARMY INC**

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ZION'S ARMY INC
Name of Corporation

DOCUMENT NUMBER: N22000005618

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:

LOVETTE DOBSON
Name of Contact Person

Firm/Company

17350 STATE HWY 249 #220

Address

HOUSTON, TX., 77064

City/State and Zip Code

E-mail address: (to be used for future annual report notification)
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For further information concerning this matter, please call:

LOVETTE DOBSON at (888) 462-3453
Name of Contact Person 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

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Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508 Florida Statutes, this statement of change is submitted by a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent or both, in the State of Florida:

1. The name of the corporation: ZION'S ARMY INC

2. The principal office address: 4152 Sw 140th St Rd Ocala, FL 34473

3. The mailing address (if different):

4. Date of incorporation qualification: 04/19/2022 Document number: S22000015638

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)

LEGAL INC CORPORATE SERVICES INC
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202

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

Robbi Sarmiento
4152 Sw 140th St Rd
Ocala, FL 34473

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.

Handwritten signature of Robbi Sarmiento

Robbi Sarmiento, President
Printed (a 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.

Handwritten signature of Robbi Sarmiento

04/27/2023
Date

If signing on behalf of an entity

Typed 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

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