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N22858

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer: 2 doc's 1 fee P. Umissing	

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R. WHITE



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 13, 2015

MIGUEL R REYES 6801 RIVER RD TAMPA, FL 33615-2848

SUBJECT: MINISTERIO PREGONEROS DE LA FE, INC.

Ref. Number: N22858

We have received your document for MINISTERIO PREGONEROS DE LA FE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

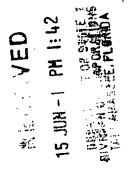
You have submitted 2 documents under one filing fee Please chose the document you wish to file or remit an additional filing fee of \$35.00 to file both. Also, the last page is missing from the articles of amendment. If you chose to file this document, page 4 will need to be completed and submitted along with it.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 515A00010078



COVER LETTER

Y REGONEROS DE LA FE (NC Name of Corporation N22858 **DOCUMENT NUMBER:** 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: INISTERIO PREGOUEROS DE LA PE, INC. ess: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a \$35.00 check made payable to the Department of State.

Street Address:

Clifton Building

Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address:

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

CR2E045 (03/12)

TO:

Amendment Section Division of Corporations

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

Pursuant to the provision's of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this 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: WINISTERIO PREGONEROS DE LA FE, IA
2. The principal office address: 7310 FOUNTAIN AUE TAULA FL 33634
3. The mailing address (if different):
4. Date of incorporation/qualification: 10 06 1987 Document number: N. 22858
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)
VICTOR NAZCO
7310 FOUNTAIN AUE
TAMPA FL, 33634
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
MIGUEL R REVES
6801 RIVER RATAMA FZ P.O. Box NOT acceptable
33615-2848
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.
Signature of an officer ordinaria Printed or 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.
Signature of Registered Agent 5 Date
If signing on behalf of an entity:
NA
Typed or Printed Name

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