

N2400000 4800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

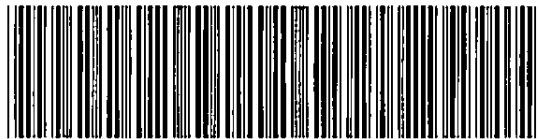
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800430463018

DE 30/01/2024 09:44:35, 10

CLERK OF STATE
TALLAHASSEE, FL
JUN 30 PM 12:59
ED

A. HUNT

CS/SC/24

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sisters of True Light Chapter # 60 Inc
Name of Corporation

DOCUMENT NUMBER: N-2400004800

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:

Betty Crawford

Name of Contact Person

Sisters of True Light Chapter # 60 Inc

Firm/Company

4148 Fairfield Avenue S.

Address

Saint Petersburg, Florida 33711

City/State and Zip Code

al.bartonsr@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Betty Crawford

Name of Contact Person

at (727) 645 3893

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

2004 JUN 30 PM 12:59
TALLAHASSEE, FL
DEPT OF STATE

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

Pursuant to the provisions 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: Sisters of True Light Chapter # 60 Inc
2. The principal office address: 4148 Fairfield Avenue South, Saint Petersburg, Florida 33711
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/15/2024 Document number: N-2400004800
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)

LegalCorp Solutions, LLC

3440 W. Hollywood Blvd. Suite 415

Hollywood, Florida 33021

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

Alexander Barton

3899 Wahoo Drive SE

P.O. Box NOT acceptable

Saint Petersburg, Florida 33705

RECEIVED
TALLAHASSEE, FL
MAY 20 2024
PM 12:59

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.

x Betty Crawford
Signature of an officer or director

Betty Crawford

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.

Alexander Barton
Signature of Registered Agent

05/20/2024

Date

If signing on behalf of an entity:

Alexander Barton

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

CR2E045 (04/13)