736848

(Re	equestor's Name)	
(Ad	ldress)	
		•
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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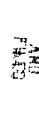
Office Use Only



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SEGRETARY OF MARY





COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	Name of Corpo	oration	
DOCUMENT NUMBE	R:N2	6848	· ·
The enclosed Statement of	of Change of Registered Office/A	gent and fee are sul	omitted for filing.
Please return all correspo	ndence concerning this matter to	the following:	
	LEON M. RO	BERTS	
	Name of Contac	et Person	
	MAINSTREET CHRIS		
	Firm/Comp	any	
	1300 NE 38TH		
• *************************************	Address	,	
<u></u>	OAKLAND PARK City/State and Z		
	Cny/State and Z	np code	
E-ma	il address: (to be used for futur	re annual report n	otification)
For further information c	oncerning this matter, please call:		
LEON N	M. ROBERTS a	at (954)	649-4787 aytime Telephone Number
Name of (Contact Person	Area Code & Da	aytime Telephone Number
Enclosed is a \$35.00 ched	k made payable to the Departmen	nt of State.	
<u>.</u>	Mailing Address: Amendment Section	Street Addr Amendmen	ess:
-	Amenament Section Division of Corporations	*	Corporations
	P.O. Box 6327	Clifton Bui	•
1	Fallahassee, FL 32314		ntive Center Circle

CR2E045 (8/05)

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida State ange is submitted for a corporation organized under the laws of the State of \overline{FLC} er to change its registered office or registered agent, or both, in the State of Flori	ORIDA		
1. The name of	the corporation: MAINSTREET CHRISTIAN CHURCH ()FFC	ORTLA	IUDE	R
	l office address: 1300 NE 38TH STREET			
OAKLAN	D PARK, FL 33334	<u> </u>		_
3. The mailing	address (if different):			_
4. Date of incom	rporation/qualification: 2/4/12 Document number:	N26848		_
	d street address of the current registered agent and registered office on file with the trument of State: (If resigned, enter resigned)	ne		
	MAINSTREET CHRISTIAN CHURCH			
	1300 NE 38TH STREET	**************************************		
	OAKLAND PARK, FL 33334		12 P	
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office	TASSET I	B-8	
	PASTOR LEON M. ROBERTS	T.	至	•
	7917 NW 7TH COURT	****	100 100 100	
	P.O. Box NOT acceptable			
	PLANTATION, FL 33324-1464			
The street addr as changed wil	ress of its registered office and the street address of the business office of its rell be identical.	gistered ag	ent,	
Such change wanthorized by	vas authorized by resolution duly adopted by its board of directors or by an off the board, or the corporation has been notified in writing of the change.	icer so		
/ Nem 1	LEON M. ROBERTS / DIR Printed or typed name and title	RECTOR	_	
I hereby accep I further agree of my duties, a document is be corporation ha	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comple nd I am familiar with and accept the obligation of my position as registered as ing filed merely to reflect a change in the registered office address, I hereby c s been notified in writing of this change.	ete perform gent. Or, ij onfirm thai	ance f this t the	
den	m Roberta 2/4/12 gnature of Registered Agent Date			
	ehalf of an entity:			
	Fyped 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 (8/05)