

N93 000000 5287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

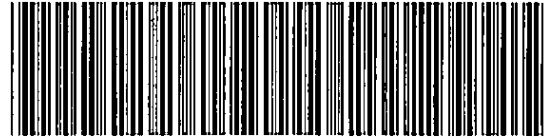
(Document Number)

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20 FEB 24 PM 1:05

FEB 26 2020  
C. McNAIR

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Calvary Chapel of Miami Beach, Inc.  
Name of Corporation

DOCUMENT NUMBER: N93000005287

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:

Robert F. Fountain  
Name of Contact Person

Calvary Chapel of Miami Beach  
Firm/Company

7141 Indian Creek Drive  
Address

Miami Beach, FL 33141  
City/State and Zip Code

info@calvarymiami-beach.org  
E-mail address: (to be used for future annual report notification)

20 FEB 24 PM 1:05

For further information concerning this matter, please call:

Paul S. Funk (VP) at (305) 531-2730  
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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

2019 DEC 26 PM 1:58

**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: Calvary Chapel of Miami Beach, Inc.  
2. The principal office address: 7141 Indian Creek Drive  
Miami Beach, FL 33141  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 11/16/1993 Document number: N93000005287

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)

Weigel, Russell C III  
5775 Blue Lagoon DR suite 100  
Miami, FL 33126

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

Robert F. Fountain  
7141 Indian Creek Drive  
P.O. Box NOT acceptable  
Miami Beach, FL 33141

20 FEB 24 PM 1:05  
FILING

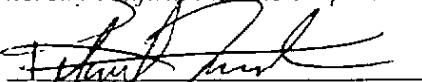
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

~~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 or director

Robert Fountain, President  
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

5/9/19  
Date

If signing on behalf of an entity:

ROBERT FOUNTAIN  
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