NAH (CCCC 3431

(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



000354599080

11/12/20--01022--028 **35.00

2020 NOV 12 PH 6: 06 Secretary of State

12/17/20



COVER LETTER

Amendment Section

TO:

Division of Corporations
SUBJECT: HUrst Chapel A. M. E. Church of Perrine, INC. Name of Corporation
DOCUMENT NUMBER: <u>N9400003431</u>
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please feturn all correspondence concerning this matter to the following:
Hurst Chapel A.M. E. Church of Perme, INC
Hurst Chapel A.M. E. Church of Perme, IVC
10080 West Jessamine Street
Perme 176 133157
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Emwa L. Brooks at 365, 788-0896 Name of Contact Person at Code & Daytime Telephone Number
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

CR2E045 (04/13)

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Hurst Chapel A. N. E. Church of Perrine In.
2. The principal office address: 10080 West Jessamine Street
Perrine, FL, 33157
3. The mailing address (if different):
4. Date of incorporation/qualification: 1944 Document number: <u>N9400003431</u>
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)
Emma L. Brooks
Perme, PL 33/57 Perme, PL 33/57
Perine, FL33/57
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Rev. Covecumdor Sumpler
Rev. Covecimeta Sumpler
10080 West Jessamine Street
Perrite, FL 33157
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 Example of 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. Thereby confirm that the corporation has been notified in writing of this change.
November 2, 2020 Signature of Registered Agent
If signing on behalf of an entity:
Typed or Printed Name

Make checks payable to Florida Department of State Mah. To: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)

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