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C. GOLDEN JUL 1 1 2018

## **COVER LETTER**

TO:	Amendment Section Division of Corporations			
SUBJI	ECT: ABUNDANT LIFE MINISTRIES, INC Name of Cor	D. poration		
DOCU	JMENT NUMBER: N96000001183			
The en	closed Statement of Change of Registered Office/	Agent and fee are submitted for filing.		
Please	return all correspondence concerning this matter	to the following:		
	Brian D. Hudson, Esq. Name of Cont	act Person		
Holding Company of The Villages, Inc. Firm/Company				
3619 Kiessel Road				
The Villages, Florida 32162 City/State and Zip Code legalnotices@thevillages.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Chi	risti Jacquay  Name of Contact Person	at ( <u>352</u> ) <u>753-6612</u> 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		

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

statement of char	rovisions of sections 607,9302, 617,9302, 607,1308, or 617,1308, Florida age is submitted for a corporation organized under the laws of the State of to change its registered office or registered agent, or both, in the State of 1	Florida	
1. The name of the	ne corporation: ABUNDANT LIFE MINISTRIES, INC.		
2. The principal of	office address: 3619 Kiessel Road		
	The Villages, Florida 32163		
3. The mailing ac	ldress (if different):		
4. Date of incorp	oration/qualification: 02/29/1996 Document number: N9600	0001183	
	street address of the current registered agent and registered office on file w ment of State: (If resigned, enter resigned)	ith the	
	Brian D. Hudson		
	1020 Lake Sumter Landing	2018 J SECR	-
	The Villages, Florida 32162	2018 JUL 10 SECRETARY	=
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered of	144 ×	
	3617 Kiessel Road	5-	
•	P.O. Box NOT acceptable	•	
	The Villages, Florida 32163	•	
The street address changed will	ss of its registered office and the street address of the business office of it be identical.	ts registered agen	ıt.
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an e board, or the corporation has been notified in writing of the change.	officer so	
<i>[ ]</i>	Gary L. Lester, President of typed name and tit	dent	
I further agree to performance of it agent. Or, if this	the appointment as registered agent and agree to act in this capacity. I comply with the provisions of all statutes relative to the proper and control with an accept the obligation of my positions document is being filed merely to reflect a change in the registered office hat the corporation has been notified in writing of this change.	nplete n as registered ve address, I	
Sign	ature of Registered Agent Date		
If signing on bel	nalf of an entity:		
Ту	ped or Printed Name		

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