

N96000 002 814

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

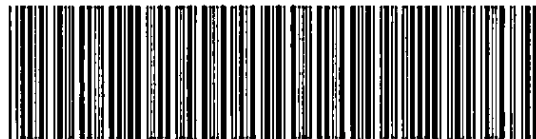
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800335295068

10/10/19--01008--009 **35.00

FILED
2019 OCT 10 PM 6:15
SEC. OF STATE
TALLAHASSEE, FL

OCT 29 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: New Bethel African Methodist Episcopal Church, INC.
Name of Corporation

DOCUMENT NUMBER: N96000002814

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:

Annie Reatha Johnson

Name of Contact Person

New Bethel AME Church

Firm/Company

2275 West 5th Way

Address

Hialeah, FL 33010

City/State and Zip Code

glodeejohn@aol.com

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

For further information concerning this matter, please call:

Annie Reatha Johnson at 305 812-4689
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

**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: New Bethel African Methodist Episcopal Church, INC.
2. The principal office address: 2275 W. FIFTH WAY
HIALEAH, FL 33010
3. The mailing address (if different): _____
4. Date of incorporation/qualification: _____ Document number: N96000002814
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)

Rev. Ronnie Britton

2315 NW 155 Street

Miami Gardens, FL 33054

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

Rev. Durrell S. Knight

1875 NW 157th Street

P.O. Box NOT acceptable

Miami Gardens, FL 33054

FILED
2019 OCT 10 PM 6:15
SECRETARY OF STATE
TALLAHASSEE, FL

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.

Annie Reatha Johnson
Signature of an officer or director

Annie Reatha Johnson

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.

Durrell S. Knight
Signature of Registered Agent

10/6/2019

Date

If signing on behalf of an entity:

Durrell S. Knight
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