N98000000836

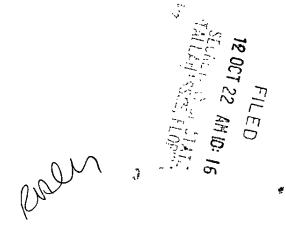
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OCT 2 2 2017 C. MUSTAIN

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Daytona Beach I.D.M.R., Inc.

Name of Corporation

DOCUMENT NUMBER, N9800000836

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:

Dr. Kemya R. Brooks

Name of Contact Person

Daytona Beach I.D.M.R., Inc.

Firm/Company

1417 Continental Drive

Address

Daytona Beach, FL 32117

City/State and Zip Code

kemya_brooks@yahoo.com

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

For further information concerning this matter, please call:

Dr. Kemya R. Brooks

4,386

383-4076

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 Sect

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

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September 13, 2012

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KEMYA R. BROOKS 1417 CONTINENTAL DRIVE DAYTONA BEACH, FL 32117

SUBJECT: DAYTONA BEACH INSTITUTE OF DIVINE METAPHYSICAL

RESEARCH, INC.

Ref. Number: N98000000836

We have received your document for DAYTONA BEACH INSTITUTE OF DIVINE METAPHYSICAL RESEARCH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain Regulatory Specialist II

Letter Number: 612A00023095

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

	•	2, 607.1508, or 617.1508, Florida Statutes, this ized under the laws of the State of Florida
-	-	ered agent, or both, in the State of Florida.
1. The name of	the corporation: Daytona Beach Ins	stitute Of Divine Metaphysical Research, Inc
2. The principal	office address: 1417 Continental I	Orive
	Daytona Beach, F	L 32117
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: 02/12/1998	Document number: N9800000836
	d street address of the current registered a rtment of State: (If resigned, enter resigned	gent and registered office on file with the \widetilde{f}
	Dr. Lisa A. Brooks	ALL SEC
	26 Fair Oaks Circle	TE OCT 2
	Ormond Beach, FL 32174	
6. The name and (if changed):	d street address of the new registered ager	nt (if changed) and /or registered office
	Dr. Kemya R. Brooks	3
	1417 Continental Drive	
P.O. Box NOT acceptable Daytona Beach, FL 32117		acceptable
The street addre as changed will	ess of its registered office and the street be identical.	address of the business office of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been no	by its board of directors or by an officer so tified in writing of the change.
Dr. Lug	re of an office or director	Dr. Lupe L. Kinley, C.E.O. & President Printed or typed name and title
I hereby accept I further agree i performance of agent. Or, if th	the appointment as registered agent and to comply with the provisions of all state	d agree to act in this capacity. utes relative to the proper and complete ccept the obligation of my position as registered ect a change in the registered office address. I
Ur Her	myak Blooks	09/29/2012
, ,	half of an entity:	s/atv
Dr. Kemya	R. Brooks	
T	yped or Printed Name	

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