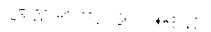
P17000031693

| (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: | | |
| J. HORNE | | |
| EB 1 0 2022 | | |
| | | |
| <u> </u> | | |

Office Use Only



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FILED
2022 JAN 25 PH 1: 26
SECRETARY OF STATE

COVER LETTER

TO:

Amendment Section Division of Corporations

| SUBJECT: Church of the Fire Power Inc. Name of Corporation | | |
|---|--|--|
| DOCUMENT NUMBER: P17000031693 | | |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. | | |
| Please return all correspondence concerning this m | natter to the following: | |
| Victor W Dunlap II | | |
| Name of Contact Person | P 14 MA 4 MA | |
| Church of the Fire Power Inc. | | |
| Firm/Company | | |
| 5333 Seaton Hall Ln. | | |
| Address | | |
| Orlando, Florida 32821 | | |
| City/State and Zip Code | - | |
| Vic@Churchofthefirepower.com | n | |
| E-mail address: (to be used for future annual re | eport notification) | |
| For further information concerning this matter, ple | ase call: | |
| Victor W Dunlap II | at (4077023066) | |
| Name of Contact Person | at (4077023066) Area Code & Daytime Telephone Number | |
| Enclosed is a \$35.00 check made payable to the Do | epartment of State. | |
| Mailing Address: Amendment Section | Street Address: | |
| Amendment Section Division of Corporations | Amendment Section | |
| P.O. Box 6327 | Division of Corporations The Centre of Tallahassee | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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 Statustatement of change is submitted for a corporation organized under the laws of the State of Florid in order to change its registered office or registered agent, or both, in the State of Florid | la | |
|---|--|--|
| . The name of the corporation: Church of the Fire power Inc. | | |
| 2. The principal office address: 5333 Seaton Hall Ln. Orlando, Florida 32821 | | |
| 3. The mailing address (if different): | | |
| 4. Date of incorporation/qualification: 04/06/2017 Document number: P17000031693 | | |
| 5. The name and street address of the current registered agent and registered office on file with th Florida Department of State: (If resigned, enter resigned) | | |
| UNITED STATES CORPORATION AGENTS, INC. | | |
| 5575 S. SEMORAN BLVDSUITE 36 | | |
| ORLANDO, FL 32822 | 20 | |
| 5. The name and street address of the new registered agent (if changed) and /or registered office (if changed): | JO22 JAN 25 SECRETARY | |
| Victor W Dunlap II | | |
| 5333 Seaton Hall Ln | PH 1:20 | |
| P.O. Box NOT acceptable | 26 | |
| Orlando, Florida 32821 | | |
| The street address of its registered office and the street address of the business office of its registered will be identical. | gistered agent, | |
| Such change was authorized by resolution duly adopted by its board of directors or by an office of the board, or the corporation has been notified in writing of the change. | er so | |
| Victor W Dunlap II President | | |
| Signature of an officer or director 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 completely forms and I am familiar with and accept the obligation of my position as registered ago Iocument is being filed merely to reflect a change in the registered office address. I hereby co- corporation has been putified in writing of this change. | e performance ent. Or, if this onfirm that the | |
| 1 Later 1 (13) 13033 | | |
| Signature of Registered Agent (/20/2072) Date | | |
| f signing on behalf of an entity: | | |
| CHURCH OF THE FIRE POWER INC. Typed or Printed Name | | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

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