L, FL 33909			
30-0554921		Certificate of Status Desi	ired: No
ddress of Current Registered Agent:			
ARIE F L 33909 US			
entity submits this statement for the purpose of changing its regist	tered office or regis	tered agent, or both, in the State of Flo	rida.
MORISSEAU MARIE F			01/15/2018
Electronic Signature of Registered Agent			Date
tor Detail :			
P	Title	VP	
DELICE, DENIS	Name	JOHN, CLAUDETTE	
115 ORTONA ST LE-HIGH ACRES	Address	318 NE 17TH PL	
FT MYERY FL 33936	City-State-Zip:	CAPE CORAL FL 33909	
S	Title	т	
OSNER, MORISSEAU F SR.	Name	JEANNE, HOVING D	
318 NE 17TH PL	Address	318 NE 17TH PL	
CAPE CORAL FL 33909	City-State-Zip:	CAPE CORAL FL 33909	
C JANNE, SENNAT 318 NE 17TH PL			
	L, FL 33909 30-0554921 ddress of Current Registered Agent: ARIE F L 33909 US entity submits this statement for the purpose of changing its regis entity submits this statement for the purpose of changing its regis entity submits this statement for the purpose of changing its regis entity submits this statement for the purpose of changing its regis entity submits this statement for the purpose of changing its regis entity submits this statement for the purpose of changing its regis entity submits this statement for the purpose of changing its regis entity submits this statement for the purpose of changing its regis entity submits this statement for the purpose of changing its regis Entity submits this statement for the purpose of changing its regis Entity submits this statement for the purpose of changing its regis Entity submits this statement for the purpose of changing its regis Entity submits this statement for the purpose of changing its regis Entity submits this statement for the purpose of changing its regis S OSNER, MORISSEAU F SR. 318 NE 17TH PL CAPE CORAL FL 33909 C JANNE, SENNAT	L, FL 33909 30-0554921 ddress of Current Registered Agent: ARIE F 1 33909 US entity submits this statement for the purpose of changing its registered office or regists entity submits this statement for the purpose of changing its registered office or regists entity submits this statement for the purpose of changing its registered office or regists entity submits this statement for the purpose of changing its registered office or regists entity submits this statement for the purpose of changing its registered office or regists entity submits this statement for the purpose of changing its registered office or regists entity submits this statement for the purpose of changing its registered office or regists Entity submits this statement for the purpose of changing its registered office or regists Entity submits this statement for the purpose of changing its registered office or regists Entity submits this statement for the purpose of changing its registered office or regists Entity submits this statement for the purpose of changing its registered office or regists Entity submits this statement for the purpose of changing its registered office or regists Entity submits this statement for the purpose of changing its registered office or regists FT MORISSEAU MARIE F Electronic Signature of Registered Agent S 0 Title OSNER, MORISSEAU F SR. Name 318 NE 17TH PL C 10 JANNE, SENNAT	L, FL 33909 30-0554921 Certificate of Status Desired Agent: ARIE F 1 33909 US entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flore interval of Registered Agent MORISSEAU MARIE F Electronic Signature of Registered Agent Tor Detail : P P P CIT P P P P P P P P P P P P P P P P P P P

318 NE 17TH PL CAPE CORAL, FL 33909

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: RABBI LOVE INTERNATIONAL MINISTRY INC.

Current Mailing Address:

DOCUMENT# N08000011124

Current Principal Place of Business:

City-State-Zip: CAPE CORAL FL 33909

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

AGENT SIGNATURE: MORISSEAU MARIE F CLAUDETTE JHON, DENIS DELICE, OSNER MORISSEAU, JANNE SENNAT

FILED Jan 15, 2018 **Secretary of State** CC5735073521

01/15/2018

Electronic Signature of Signing Officer/Director Detail