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.

SIGNATURE: JONATHAN MCCLELLAN

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N19000010332

Entity Name: CREATURE COMFORTS RESCUE INC

Current Principal Place of Business:

7235 BONNEVAL ROAD SUITE 212 JACKSONVILLE, FL 32256

Current Mailing Address:

7235 BONNEVAL ROAD SUITE 212 JACKSONVILLE, FL 32256 US

FEI Number: 84-3205114

Name and Address of Current Registered Agent:

KIMBALL, ALEXIS K 7235 BONNEVAL ROAD SUITE 212 JACKSONVILLE, FL 32256 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	D	Title	D
Name	KIMBALL, ALEXIS	Name	KIMBALL, KATHERINE
Address	7235 BONNEVAL ROAD	Address	1863 BUCCANEER DRIVE
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32225
Title	D		
Name	MCCLELLAN, JONATHAN		
Address	7235 BONNEVAL ROAD		
City-State-Zip:	JACKSONVILLE FL 32256		

DIRECTOR

01/22/2020

Date

Jan 22, 2020 Secretary of State 6823336001CC

FILED

Certificate of Status Desired: No

Date