## **Division of Corporations** Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000442321 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

The state of the second of the state of the

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## REGISTERED AGENT CHANGE 500 JORDAN STUART PROPERTY, LP

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$35.00 |

DEC 0 6 2021

A. LUNT

Electronic Filing Menu Corporate Filing Menu

Help

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

|  | AN STUART PRO  |   |  |
|--|--|---|--|
| , 09/16/2020                                 |  | 3. B2000000175  Florida document number   |  |
| Date of filing/registration in Florida       |  |   |  |
| 4. The name of the r<br>Department of State: | egistered agent and the registered of  | office address as shown on the records of the Florida   |  |
| •  | HILLSLEY, SHA  | NE  |  |
|  | Nam  | <del></del>   |  |
|  | 7500 GLADES R  | D STE 500   |  |
|  | Addr   | ess   |  |
|  | BOCA RATON, I  | FL 33434  |  |
|  | City, State  |   |  |
| 5. The name and Flo                          | rida street address of the new regi-   | stered agent and/or office;   |  |
|  | Corporate Creatio  | ns Network Inc.   |  |
|  | Nan  |   |  |
|  | 801 US Hwy 1   |   |  |
|  | Florida street address (P.   | O. Box not acceptable)  |  |
|  | North Palm Beach   | <sub>FL</sub> 33408   |  |
|  | City, State  |   |  |
| 6. Such change(s) is                         | are effective when filed by the Flo  | orida Department of State.  |  |
| 4  |  |   |  |
| Signature of General                         | Partner 500 JORDAN STUART PROPERS By: Sean Amo, Altomey-in-Faci  | 'Y GP, LLC - General Parliner   |  |
| comply with the prov                         | ppointment as registered agent an<br>visions of all statutes relative to the<br>th an accept the obligations of my | d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent. |  |
|  | Danielle Gossman, Special Secretary  |   |  |
| Signature of Registe                         | red Agent  |   |  |
|  |  |   |  |

\$35.00

Filing Fee:

Certified Copy (optional): \$52.50