

# Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6380

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

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

Email Address: \_\_\_\_\_

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 SECRETARY OF STATE  
 TALLAHASSEE FL

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## REGISTERED AGENT CHANGE ACAP & ASSOCIATES, INC.

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JAN 15 2020

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

- 1. The name of the corporation is: Advanced Capital Solutions, Inc.
- 2. The principal office address: 5553 WHIPPLE AVENUE NW STE 5  
NORTH CANTON OH 44720
- 3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 12/7/2015 Document Number: F1600000020

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:


CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporate Creations Network Inc.  
801 US Highway 1  
North Palm Beach FL 33408  
(P.O. Box Not acceptable)


The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
(Signature of an officer or director)

Saray Djidji, Attorney-in-Fact  
\_\_\_\_\_  
(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 complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
Saray Djidji, Special Secretary  
\_\_\_\_\_  
(Signature of Registered Agent)

01/14/2020  
\_\_\_\_\_  
(Date)

If signing on behalf of an entity:  
Corporate Creations Network 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

Corporate Creations International Inc.  
801 US Highway 1  
North Palm Beach FL 33408  
(561) 694-8107

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