

Florida Department of State
Division of Corporations
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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)214-8442

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

Email Address: _____

REGISTERED AGENT CHANGE
CHILD SAFETY SHELTERS, INC.

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

A. BUTLER

JUL 27 2022

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

1. The name of the corporation is: CHILD SAFETY SHELTERS, INC.
2. The principal office address: 8875 Hidden River Parkway, SUITE 300
Tampa FL 33637
3. The mailing address (if different): 2402 STOUFFVILLE RD. P O BOX 245
GORMLEY ON L0H 1-GO CD
4. Date of incorporation/qualification: 3/5/1987 Document Number: J61219
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324
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
(P.O. Box Not acceptable)
North Palm Beach FL 33408

2022 JUL 28 AM 10:59
 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FL

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.

Nicholas Nichols
(Signature of an officer or director)

Nicholas Nichols, 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.*

Nicholas Nichols
(Signature of Registered Agent)

7/26/2022
(Date)

If signing on behalf of an entity:

Nicholas Nichols, Special Secretary
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

Computershare Governance Services Inc.
801 US Highway 1
North Palm Beach FL 33408
(561) 694-8107