

FILED
Apr 15, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000011398

1. Entity Name
CREATIVE CORNER, LLC



Principal Place of Business
9250 CORKCREW RD
SUITE 8
ESTERO, FL 33928

Mailing Address
9250 CORKCREW RD
SUITE 8
ESTERO, FL 33928

DO NOT WRITE IN THIS SPACE

01082008No Chg-LLC
CR2E083 (12/07)

4. FEI Number
20-2281493

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
COSTELLO, TRUMAN J ESQ
12760 NEW BRITTANY BLVD, STE 101
FORT MYERS, FL 33907

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MILLER, STEPHANIE 9250 CORKSCREW RD ESTERO, FL 33928
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/24/08 239-277-1515

Date Daytime Phone #