

L080000070070

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

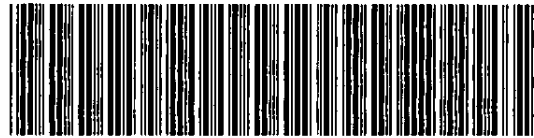
Special Instructions to Filing Officer:

A. LUNT

JUN - 8 2010

EXAMINER

Office Use Only



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05/14/10--01008--005 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JUN - 7 PM 2:28

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 17, 2010

IAN DESOUSA
2109 HERSCHEL STREET
JACKSONVILLE, FL 32204

SUBJECT: CREATIVE EMPIRE, LLC
Ref. Number: L08000070070

We have received your document for CREATIVE EMPIRE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 910A00012425

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Creative Empire, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ian DeSousa
Name of Person

Creative Empire, LLC
Firm/Company

2109 Herschel Street
Address

Jacksonville, FL 32204
City/State and Zip Code

ian@stateofthereunion.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ian DeSousa at (904) 647.7718
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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2010 JUN -7 PM 2:28
TALLAHASSEE, FLORIDA
CLERK OF COURT

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Creative Empire, LLC

2. (a) Principal office address of limited liability company: 2109 Herschel Street

☒ (Note: **MUST BE STREET ADDRESS**)

Jacksonville, FL 32204

(b) Mailing address of limited liability company: 2109 Herschel Street

☒ (Note: **MAY BE POST OFFICE BOX**)

Jacksonville, FL 32204

07/21/2008

L08000070070

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State

Registered Agent: Corporation Service Company

Registered Office Address: 1201 Hays Street

Tallahassee, FL 32301

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: Ian DeSousa

NEW Registered Office Address: 2109 Herschel Street

(MUST BE FLORIDA STREET ADDRESS) Jacksonville, FL 32204

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Ian DeSousa

Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

FILED

2008 JUN -7 PM 2:28
STATE DEPT. OF STATE
TALLAHASSEE, FLORIDA