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## COVER LETTER

TO: Registration Section Division of Corporations

CSK Creative LLC
SUBJECT:

NUDJECT

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:

Keely Kotilinek

Name of Person

CSK Creative LLC

Firm/Company

2040 Springs Landing Blvd

Address

Longwood, FL 32779

City/State and Zip Code

keely@cskcreative.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Keely Kotilinek	407 451-5021 at ( )	
Name of Person	Area Code & Daytime Te	elephone Number
Mailing Address:	Street Address:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporatio	ns –
P.O. Box 6327	The Centre of Tallahas	isee
Tallahassee, FL 32314	2415 N. Monroe Street	t, Suite 810
	Tallahassee, FL 32303	

## Enclosed is a check for the following amount:

**\$**25 Filing Fee

□ \$55 Filing Fee & Certified Copy

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

Pursuant to the provisions of sections 605.0114 or 605.0116. 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.

Na	me of the limited liability company:	.C		<del>_</del>
(a)	CSK Creative LLC		(b) <u>CSK Creati</u>	ve LLC
()	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )			tailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	2040 Springs Landing Blvd		2040 Spring	is Landing Blvd
	Longwood, FL 32779		Longwood,	FL 32779
	7/21/2009		1,0900006990	2(
	Date of filing/registration in Florida	4.	i	Document number
(a)	Keely Kotilinek Registered Agent and Registered Office shown on the records of			
	Registered Office Address ( <u>MUST BE FLORIDA STREET</u> 2000 Galen Ave		·	
	Winter Park, F			2024 SEP 24 PM Static at 001 Tallahassee
(b)	Keely Kotilinek			Р 24 АНА
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office	address:	SSEL SSEL
	CSK Creative LLC			2: 14 State E. FL
	<u>NEW</u> Registered Office Address:			·≓¦ <b>-</b>
	2040 Springs Landing Blvd			

Signature of a plenber or authorized representative of a member

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 605, 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.

th Registered Agent Signature

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00