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COVER LETTER

Registration Section Division of Corporations

\$25 Filing Fee

INHS18 (2/14)

TO:

SUBJECT: Actistically Created LLC Name of Limited Liability Company			
Dear Sir or Madam:			
The analoged Designand Agent/Designand Office Change and for(a) are submitted for filing			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
April Michelle Kelly Name of Person			
Artistically Created Firm/Company			
114 C Benning Dr. Address 9			
Destin FL. 32541 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Michelle Kelly at (850) 259 - 4171 Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: MAILING ADDRESS:			
Registration Section Registration Section Division of Corporations Division of Corporations			
Clifton Building P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			

□ \$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.

1. Name of the limited liability company: Actistically Crea	ted LLC
Principal office address of limited liability company: Mailing add	dress of limited liability company: MAY BE POST OFFICE BOX
Destin, FL. 32541 Destin	n, FL
,	32541
3. Date of filing/registration in Florida 4. Documents	0133891 ent number
5. (a) Wade H. Fleshman	
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 306 Golf View DC	Σα
miramar Beach FL 32550	
(b) April Michelle Kelly Enter name of NEW Registered Agent and/or NEW Registered Office address:	MAY 31 AM
114 C Benning Dr. NEW Registered Office Address:	7: 3: 1: 3: 3: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1:
Destin, FL. 32541	%
, FL	
If the limited liability company is not organized under the laws of the State of Florida, it is the change or changes are made, the Florida street address of the registered office and the agent will be identical. Or, in the case of a Florida limited liability company, it is hereby was/were authorized by an affirmative vote of the members of the limited liability compant the articles of organization or the operating agreement of the limited liability company.	business office of the registered confirmed that the change(s)
Signature of a member or authorized representative of a member WADE H.	FIESHMAN TIT
I hereby accept the appointment as registered agent and agree to act in this capacity. If	

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.

Signature of Registered Agent

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