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K.SALY EXAMINER JUL -7 2015



340 N. Westlake Blvd. | Suite 210 | Westlake Village, CA 91362

June 23, 2015

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

RE: Creative Services Consultants, LLC

To whom it may concern:

The Enclosed Statement of Change of Registered Office/Agent and Fee(s) are submitted for filing.

Also, please find enclosed a check for state filing fees in the amount of \$25.00 made payable to the FL Dept of State. For information to this filing at the undersigned.

Thank you in advance and please return all correspondence in regards to this filing using the pre addresses stamped envelope included.

Sincerely,

Amanda J. Beren, Document Processor CorpNet, Incorporated 888-449-2638 Ext. 105 aberen@corpnet.com



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.	Na	me of the limited liability company: Creative Service	es Consultants	, LLC
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(h)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		9113 Ridge Rd. Suite #34 Newport Richey, FL 34654		
		6/6/2014	L14000	0090915
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	Corporation Service Company		
5. (a	(4)	Registered Agent and Registered Office shown on the records of t	State:	
		1201 Hays St.	2 7	
		Registered Office Address (MUST BE FLORIDA STREET A		
(h		Tallahassee , FL	32301	State: TILE DO
	(b)	Registered Agents Inc.		800 L
	` '	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		
		3030 N. Rocky Point Dr., Ste. 150A		
		NEW Registered Office Address:		
		Tampa , FL	33607	
the age wa	echa ent v is/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of eles of organization or the operating agreement of the	the registered of ability company, of the limited liab	ffice and the business office of the registered it is hereby confirmed that the change(s) pility company or as otherwise provided in company.
_	Signa	ture of a member or authorized representative of a member	Allialiua D	Printed or typed name of signee
I I pro tho	herei ovisi obl mere	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided ly reflect a change in the registered office address, I have a change in the registered office address, I have a change in the registered office address.	ree to act in this of performance of a difference of the form of the perform to the form to the perform to the form to the for	capacity. I further agree to camply with the
Si	gnatu	re of Registered Agent		

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