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J. HARRIS

COVER LETTER

TO: Registration Section

INHS18 (2/14)

Divi	sion of Co rp orations					
SUBJECT:	Z Space Creative LLC					
	Name of Limited Liability Company					
Dear Sir or N	Madam:					
The enclosed	d Registered Agent/Registered Offi	ce Change and f	ee(s) are submitted for filing.			
Please return	all correspondence concerning thi	s matter to the fo	ollowing:			
Suzanne (D. Meehle, Esq.					
-	Name of Person		_			
Meehle &	Jay, PA					
	Firm/Company		_			
1215 E Co	oncord Street					
	Address		_			
Orlando, F	FL 32803					
	City/State and Zip Code		_			
E-mail	address: (to be used for future annual	ual report notific	eation)			
For further in	nformation concerning this matter,	please call:				
Suzanne [D. Meehle, Esq	407 at (792-0790			
	Name of Person		Area Code & Daytime Telephone Number			
Regi Divi Clift 2661	istration Section sion of Corporations ton Building Executive Center Circle ahassee, Florida 32301	Reg Divi P.O.	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, Florida 32314			
	losed is a check for the following	amount:				
2 \$	25 Filing Fee 35	□ \$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. Na	ame of the limited liability company: Z Space Crea	itive LLC				
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of lin	mited lia	ability comp	any;
	1672 Bayside Street	1672 E	Bayside Street			_
	Merritt Island, FL 32952	Merritt Island, FL 32952				
	09/11/14	L14000	142291			
3.	Date of filing/registration in Florida	4.	Document numb	рег		
5. (a)	Suzanne D. Meehle, Esq					
()	Registered Agent and Registered Office shown on the records of t	he Florida Dept, of S	tate:			
	Registered Office Address (MUST BE FLORIDA STREET A	IDDRESS)				
	Altamonte Springs	32701				
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:		12 m	THE PARTY POR	1
	NEW Registered Office Address:				To the second	
	1215 E Concord Street		# KODA		5. No. _{(r.e.} *)	
	Orlando , FL	32803				
the cha agent v was/we the arti	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the	the registered off ability company, i f the limited liabi	ice and the business t is hereby confirmed lity company or as company.	s officeed that	e of the re t the chang	gistered ge(s)
Signa	tere of Amember of authorized representative of a member	<u> </u>	Printed or typed na	me of si	ignee	
provisi the obl to merc notified	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ligations of my position as registered office address, I had in writing this change.	performance of m	v duties, ånd Lam i	Tamilia	ir with and	4 accent
Signatu	re of Registered Agent					