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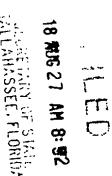
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u>^</u> .

Office Use Only



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COVER LETTER

TO: Registration Section Privision of Corporations	
SUBJECT: RVP Creative,	LLC
Va	me of Limited Liability Company
Pear Sir or Madam:	
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing,
Please return all correspondence concerning the	his matter to the following:
Ryan Underploy Name of Person	
RVP Creative LLC	-
Firm/Company	
US9 Son Jun Au Address	18 MB 27 AM 8: 92 18 MB 27 AM 8: 92 FL 32459
Address	ASSE
Sarte Rosa Beach 1 City/State and Zip Code	FL 32459
City/State and Zip Code	ORE CONTRACTOR OF THE CONTRACT
RVPCREATIVE & GM.	
E-mail address: (to be used for future an	nual report notification)
For further information concerning this matter	r. please call:
Ryan Vanderplaces	at (402 , 547 - 7462 Area Code & Daytime Telephone Number
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	g amount:
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Co#

INHS18 (Co.-

IMITED LIABILITY COMPAN	MITED	LIAL	RHITY	COMP	ANY
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Pursuant to the provisions of sections 605.0114 submits the following statement in order to cherioria.	iange its rev	istered offic	e or registi	erea ayen	d limuea u 1. or both.	apiniv in ine	COMP. 2 SION O
ne or the limited liability company:	<u> </u>	JY EATTO				<u>_</u>	
· (a) RVP Creative LLC		(b)	RVP	Creasti	re, ll	<u> </u>	_
2. (a) RVP Creative, LLC Principal office address of limited liability	company:		Maiii	ng address o	i jimited nao	шу соп	
(<u>Note: MUST BE STREET ADDR</u>	<u>ESS</u>)				<u>E POST OF.</u>		
459 San Juan Ave			459	San	Jun/	tre	
Santa Rosa Beach FL 3	2459	_ —	Santa	Rosa	Beach	4, F.	3245
Sept 2,3015		·	4150	001501	73		
3. Date of filing/registration in Fto	rida	4.	Doc	cument nu	mor		
o. 10 United States Corporati	ion Lauri	7 Inc				•	
Registered Agent and Registered Office shown or	the records of t	he Florida Den	t, of State:				
13302 Winding Oak Car							
Registered Office Address (MUST BE FLOR		(DDRESS)					
Suika					77:		
SUICH		<u>. </u>				8	
Tampa	<u> </u>	<u> 33612</u>			쫉		
Enter name of NEW Registered Agent and/or N	EW Registered	Office adores			ARY OF ASSEE, F	27 AM	
459 San Juan Ave		·	<u></u>		S IAI: LORIUA	8: 9 2	
<u>NEW</u> Registered Office Address:							
Santa Rosa Beach	F _	3245	59				
If the limited liability company is not organized the change or changes are made, the Florida stream will be identical. Or, in the case of a Flor was/were authorized by an affirmative vote of the articles of organization or the operating agree Signature of a member or authorized representative of a linear lin	net address of ida limited lia members of the member	the registere ability comp of the limited liab	any, it is he liability compar	ompany or Vana	irmed that as otherwi	the chase prov	registered ange(s) vided in