## L17000235111

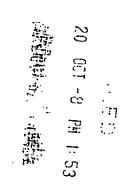
(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
<u> </u>			

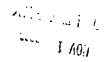




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	COVER LETTER				
TO: Registration Section Division of Corporations					
GLOBAL CREATION DESIGN LLC SUBJECT:					
Name	of Limited Li	ability Company			
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office	Change and	fee(s) are submitted for filing.			
Please return all correspondence concerning this	matter to the f	ollowing:			
ANDREA MORRA					
Name of Person	<del></del>	<del></del>			
Firm/Company		_			
1735 NE 18TH STREET					
Address		_ <del>_</del>			
Addica					
FT LAUDERDALE, FL 33305-3427		<u>-</u>			
City/State and Zip Code					
x andreai@ att. NE		_			
E-mail address: (to be used for future annua	al report notifi	cation)			
For further information concerning this matter, p	lease call:				
ANDREA MORRA	954 at (	376-9768			
Name of Person	_ at (	Area Code & Daytime Telephone Number			
Mailing Address:		Street Address:			
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			
Tallahassee, FL 32314		Tallahassee, FL 32303			
Enclosed is a check for the following a	mount:				
<b>■ \$25</b> Filing Fee	□ \$5	55 Filing Fee & Certified Copy			
INHS18 (2/14)					

## 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	ame of the limited liability company: GLOBAL CREA	TION DESIGN L	LC	
(a)	1735 NE 18TH STREET	(b) SAME AS PRINCIPAL OFFICE ADDRESS		
(/	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  FT LAUDERDALE, FL 33305		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	11/14/17	L17000	)235111	
	Date of filing/registration in Florida	4.	Document number	
	LEGALINC CORPORATE SERVICES INC	<b>''</b>		
(a)	Registered Agent and Registered Office shown on the records o	f the Florida Dent, o	f State	
	5237 SUMMERLIN COMMONS	tale i torical isopii o		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
	SUITE 400			
	FORT MYERS	. 33907	<del></del>	
	.F	L	<del></del>	
(b)	ANDREA MORRA			
(0)	Enter name of NEW Registered Agent and/or NEW Registere	d Office address:	 '&:™	
	1735 NE 18TH STREET		문	
	NEW Registered Office Address:		- ಜ್	
			<u></u>	
	CT LAUDEDTALE	33305	<u></u>	
	FT LAUDERDALE , F	L		
he l	imited liability company is not organized under the la	ws of the State of	of Florida, it is hereby confirmed that after	
nge	or changes are made, the Florida street address of the	e registered offic	e and the business office of the registered	
s/w	will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members	of the limited lia	ibility company or as otherwise provided i	
art	icles of organization or the operating agreement of the	e limited liability	company.	
D	Indu Morra	ANDREA		
	ture of a member or authorized representative of a member		Printed or typed name of signee	
here ovis e ob- mer tifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I din writing of this change.	ree to act in this e performance of ed for in Chapter hereby confirm	capacity. I further agree to comply with inv duties, and I am familiar with and acc 60.5, F.S. Or, if this document is being fit that the limited liability company has been	
ركيه	Indu Thora			
gnati	ire of Registered Agent			

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