L17000264558

(Re	equestor's Name)					
(Address)						
(Ad	ldress)					
(Cit	ty/State/Zip/Phone #	(#)				
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Name	e)				
(Document Number)						
Certified Copies	_ Certificates o	of Status				
Special Instructions to Filing Officer:						

Office Use Only



500377019975

11./90/21--01808--090 **25.00

ROICH 8

DEC 15 2021 I ALBRITTON

COVER LETTER

Division of Corporations			
Borntreger Creative LLC SUBJECT:			
	Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Cl	nange and fee(s) are submitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
Rachel L. Borntreger			
Name of Person			
Borntreger Law, PA			
Firm/Company			
527 East Park Avenue			
Address			
Tallahassee, F1, 32301			
City/State and Zip Code			
rachel@borntregerlaw.com			
E-mail address: (to be used for future annual re	port notification)		
For further information concerning this matter, pleas	e call:		
Rachel L. Bomtreger at	850 694-1411		
Name of Person	Area Code & Daytime Telephone Number		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a check for the following amou	unt:		
■ \$25 Filing Fee	\$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.

I. Na	me of the limited liability company: Borntreger Creativ	ve LLC				
2. (a)			b)			
,	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)		N	Aailing address of limited (Note: MAY BE POS)	d liability comp	any:
	527 E. Park Avenue		527 E. Park	Avenue		
	Tallahassee, FL 32301		Tallahassee	FL 32301		
	1/1/2018		L170002645	5×		
3.	Date of filing/registration in Florida	- 4.		Document number		
5. (a)	Rachel L. Borntreger					
J. (ur	Registered Agent and Registered Office shown on the records of Rachel L. Borntreger	the Floric	la Dept, of State	:	2821 111 30	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	514 East College Avenue				80	
	Tallahassee, FL	32301			A	
(b)	Rachel L. Borntreger Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		ddress:		ب. س	
	Rachel L. Borntreger					
	NEW Registered Office Address:					
	527 East Park Avenue					
	Tallahassee , FL	32301				
change agent v was/wo the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the three of a member of authorized representative of a member	register ability c of the lin limited Jas	ed office and ompany, it is nited liability liability com on Borntreger.	hereby confirmed the company or as other pany. Manager Printed or typed name of	of the regist nat the changerwise provide of signee	ered ge(s) ded in
provisi the obl to mer notified	by accept the appointment as registered agent and agri ons of all statutes relative to the proper and complete igations of my position as registered agent as provided ity reflect a change in the registered office address, I had in writing of this change.	ee to ac perforn I for in nereby c	t in this capa aance of my d Chapter 605, confirm that t	city. I further agree luties, and I am fami F.S. Or, if this doc he limited liability c	e to comply v liar with and ument is bei ompany has	vith the Laccept ng filed been