Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000106781 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

_			
т	~	•	

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

	Address:			
Em 31	VANLOCC.			

LLC REGISTERED AGENT CHANGE **CLARA CREATIVE GROUP LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

.

15129570210

→ 18506176383

pg 2 of 3 H21000106781 3

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Clara Creative Grou	p LLC imited Liability Company
name of Li	miled Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Mary Castillo	202
Name of Person	2021 HAR
Registered Agent Solutions, Inc.	
Firm/Company	PM L
1701 Directors Blvd, Suite 300	2. 14. 50 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Address	
Austin, TX 78744	
City/State and Zip Code	
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter, please	call:
Mary Castillo	888 705-7274
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations

Enclosed is a check for the following amount:

🗅 \$25 Filing Fee

2661 Executive Center Circle

Tallahassee, Florida 32301

Clifton Building

☐ \$55 Filing Fee & Certified Copy

Tallahassee, Florida 32314

P.O. Box 6327

15129570210

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

2. (a) 307 SE 5TH ST	_(b) 307 SE 5TH S	ST
Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		
DANIA BEACH, FL 33004	DANIA BEAC	
1/27/2020	L2000003364	8
3. Date of filing/registration in Florida	4. Document	number
5. (a) FIRST CORPORATE SOLUTION	ONS, INC.	(8)
Registered Agent and Registered Office shown on the recor	ds of the Florida Dept. of State:	021 MAR
Registered Office Address (MUST BE FLORIDA STR.	<u>EET ADDRESS)</u>	
TALLAHASSEE, B. Registered Agent Solutions, Inc.	, _{FL} 32301	PH 4: 50
(b) Enter name of NEW Registered Agent and/or NEW Registered Agent		
155 Office Plaza Dr.		
NEW Registered Office Address: Suite A		
Tallahassee	. FL 32301	
If the limited liability company is not organized under the change or changes are made, the Florida street addreagent will be identical. Or, in the case of a Florida limit was/were authorized by an affirmative vote of the member the articles of organization or the operating agreement of	ess of the registered office and the bu led liability company, it is hereby co pers of the limited liability company	asiness office of the registere infirmed that the change(s)
/s/ Jacob Frediana	J acob Frediana	Authorized Person
Signature of a member or authorized representative of a member	Printed or to	yped name of signee

Mackenzie Hart, Asst. Secretary
Signature of Registered Agent

notified in writing of this change.