## LZ10000000000

. (Re	equestor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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SECRETARY OF STATE

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2/15/21

## **COVER LETTER**

TO: Registration Section Division of Corporations					
Creative Properties of FL, LLC SUBJECT:					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter	to the following:				
Stacy L Bennett					
Name of Person					
Creative Properties of FL, LLC					
Firm/Company	<del></del>				
PO Box 41603					
Address	<del></del>				
St Petersburg, FL 33743					
City/State and Zip Code	<del></del>				
Stacy@StacyBennett.net					
E-mail address: (to be used for future annual repor	t notification)				
For further information concerning this matter, please ca	all:				
Stacy L Bennett 81	3 403-6480				
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 amount	:				
■ \$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.

	ame of the limited liability company: Creative Properties			
. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(b)	Nailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	2729 State Road 580		PO Box 41	603
	Clearwater, FL 33761	_	St Petersbu	rg, FL 33743
	December 21, 2020		L210000000	90
	Date of filing/registration in Florida	- 4.		Document number
()	Stacy L Bennett			
. (a)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept, of State	• ::
	Registered Office Address (MUST RE FLORIDA STREET) 200 S Hoover Blvd #145	ADDRE.	<u>(SS)</u>	
	Tampa	33609		2021 . SECI 17A
(b)	Stacy I. Bennett  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	oddress:	PILED  2021 JAH - 7 PH 2: 10  SECRETARY OF STATE TALLAHASSEE. FL
	NEW Registered Office Address:	<del></del>	-	- II 10
	2729 State Road 580			-
	Clearwater . FI	33761		
hange gent vas/wae art Signa Signa here rovisi he obio mer	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 livere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the livere of a member or authorized representative of a member of authorized representative of a member of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address, I do not not interest the statutes of this change.	registe ability of the li limited	red office and company, it is mited liability liability com acy L Bennett	If the business office of the registered shereby confirmed that the change(s) by company or as otherwise provided in apany.  Printed or typed name of signee  If further agree to comply with the