

M20000002417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Creative Cabinets & Design LLC  
Name of Limited Liability 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 following:

Missy Mills  
Name of Person

Creative Cabinets & Design  
Firm/Company

285 Lyon Lane  
Address

Birmingham, Az 35211  
City/State and Zip Code

Missy. ccd@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Missy Mills at ( 205 ) 423 5510  
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

*Already sent*

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2021 JUN -1 AM 11:08

SECRETARY OF STATE  
TALLAHASSEE, FL

May 15, 2021

MISSY MILLS  
285 LYON LANE  
BIRMINGHAM, AL 35211

SUBJECT: CREATIVE CABINETS AND DESIGN LLC  
Ref. Number: M20000002417

We have received your document for CREATIVE CABINETS AND DESIGN LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

A limited liability company may not serve as its own registered agent. Please designate an individual, an active domestic corporation or limited liability company, or a foreign corporation or limited liability company authorized to transact business within the state, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 221A00010256

**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.*

1. Name of the limited liability company: Creative Cabinets & Design LLC
2. (a) 285 Lyon Lane, Birmingham, AL 35211 (b) 285 Lyon Lane, Birmingham, AL 35211  
Principal office address of limited liability company: AL 35211 Mailing address of limited liability company: AL 35211  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

3. 3-3-2020 Date of filing/registration in Florida 4. M20000002417 Document number

5. (a) InCorp Services, Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

17888 6TH Court North  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Loxahatchee, FL 33470

- (b) Wendi Yount  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

7829 Front Beach Road  
NEW Registered Office Address:

Panama City Beach, FL 32407

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

Missy Mills  
Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

[Signature] Wendi Yount  
Signature of Registered Agent

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