P03000097378

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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 8, 2015

WILLIAM PHILLIPS TELLASTORY CREATIVE, INC 3609 W BEECH DR ROGERS, AR 72756

SUBJECT: TELLASTORY CREATIVE, INC

Ref. Number: P03000097378

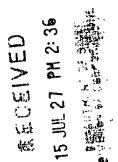
We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered agent must be at a Florida street address.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 415A00014259



TO: Amendment Section Division of Corporations SUBJECT: Tellastony Creative INC Programme of Corporation DOCUMENT NUMBER: P03000097378

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

For further information concerning this matter, please call:

William Phillips
Name of Contact Person

at (863) 670-1863

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Tell Astory Creative Inc. 2. The principal office address: 3609 W Beech DR.
Rogers, AR 12156
3. The mailing address (if different):
4. Date of incorporation/qualification: 2004 Document number: P03000091378
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (If resigned, enter resigned)
William Thillips 2100 Horseshoe CT NE
Property PR 97956 Winter Haven, FL
133881
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
William Millips
306 Ocoee-Aporka Rd, Suite 23
Ocoee, FL 34761
Ocoee, FL 34761
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer or director William D. Phillips, V.P. Printed or typed name and title
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
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
hereby confirm that the corporation has been notified in writing of this change.
17 CU D CU C-26-5
Signature of Registered Agent Date
If signing on behalf of an entity:
Total Wheel William
Typed or Printed Name

* * * FILING FEE: \$35.00 * * *