

P05000079774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

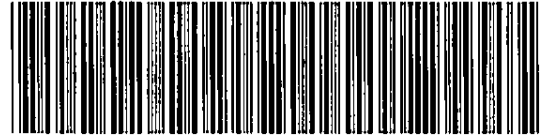
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2017 AUG 28 PM 2:48

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C. GOLDEN

AUG 31 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Adapt Creative Services, Inc
Name of Corporation

DOCUMENT NUMBER: P050000079774

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:

Dominic Zunino
Name of Contact Person
Adapt Creative Services, Inc
Firm/Company
6470 NW 106 TERRACE
Address
PARKLAND, FL 33076
City/State and Zip Code
adaptcs@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dominic Zunino at 954, 661-6366
Name of Contact Person 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: Adapt Creative Services, Inc
2. The principal office address: 6470 NW 106 TERRACE
PARKLAND, FL 33076
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 6/1/05 Document number: POS 000079774

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)

Dominic Zunino
5852 NW 120 AVE
Coral Springs, FL 33076

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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Dominic Zunino
6470 NW 106 TERRACE
PARKLAND, FL 33076

P.O. Box NOT acceptable

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]
Signature of an officer or director

Dominic Zunino President/Owner
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 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.

[Signature]
Signature of Registered Agent

8/25/17
Date

If signing on behalf of an entity:
Dominic Zunino
Typed or Printed Name

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