PD600150923

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	•
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
		7
	Office Use Only	



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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: CREATIVE ELEMENTS CATERING CORP. Name of Corporation
DOCU	MENT NUMBER: P06000150923
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Jessica Denham Name of Contact Person
	Creative Elements Catering Corp
	120 Colyer Drive Address
	Longwood FL 32779 City/State and Zip Code
	Creative elements Catering @gmail.com E-mail address: (to be used for future annual report notification)
For fu	ther information concerning this matter, please call:
·	Tessica Denham at 407-620-5077 Name of Contact Person Area Code & Daytime Telephone Number
Enclos	ed is a \$35.00 check made payable to the Department of State.
	Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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: CREATIVE ELEMENTS CATERING CORP.	
2. The principal office address: 120 COLYER DRIVE, Longwood, FL 32779	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 12/06/2006 Document number: P06000150923	
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)	
NRAI SERVICES, INC.	
515 E. Park Avenue	.,
Tallahassee, FL 32301	* >
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
InCorp Services, Inc.	
17888 67th Court North	ź
P.O. Box NOT acceptable	
Loxahatchee, FL 33470	
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.	
JESSICA Denham VP Signature of an officer or director 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.	
June 1, 2012	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Liset Robles on behalf of InCorp Services, Inc. Typed or Printed Name	
* * * FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)