

P14000022472

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

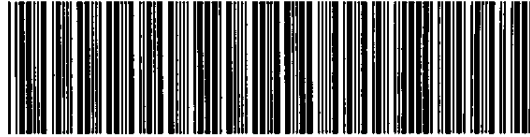
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(Business Entity Name)

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TO: Amendment Section
Division of Corporations

SUBJECT: ARTCOL CREATIONS CORP

Name of Corporation

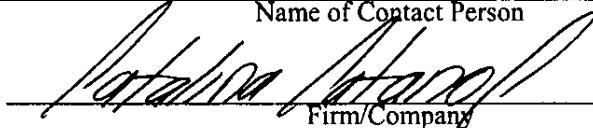
DOCUMENT NUMBER: P14000022472

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:

CATALINA CATANO

Name of Contact Person



Firm/Company

611 SW 71ST WAY

Address

PEMBROKE PINES, FL 33023

City/State and Zip Code

ARTCOL.GLASSLINE@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CATALINA CATANO

Name of Contact Person

at **786 571-1091**

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

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