

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H190000385163)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: INCORP SERVICES INC

Account Number : I20120000007

: (702)866-2500

Fax Number

: (702)866-2689

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: Managedyleports@incorp.com

REGISTERED AGENT CHANGE CRESIVE BEGINNINGS OF FLORIDA INC.

Certificate of Status	0
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H190000385163

COVER LETTER

TO: Amendme Division o	ent Section of Corporations		
SUBJECT:	Cre8ive Beginnings Of Name of Con	Florida Inc.	
DOCUMENT NU	л мвек: Р1400	00085469	
The enclosed State	ement of Change of Registered Office/	Agent and fee are submitted for filing.	
	orrespondence concerning this matter to	_	
_	Kim Bara Name of Conta	as	
	Name of Conta	ect Person	
	InCorp Service	ces, Inc.	
	Firm/Com		
3773 Howard Hughes Pkwy Suite 500S			
Address			
Las Vegas, NV 89169-6014			
City/State and Zip Code			
	manage dye as du G	· · · · · · · · · · · · · · · · · · ·	
managedreports@incorp.com E-mail address: (to be used for future annual report notification)			
	` .	· · · · · · · · · · · · · · · · · · ·	
For further informa	ation concerning this matter, please call	l:	
Kim Baraias on b	ehalf of InCorp Sendres Inc	ot (702) 800 0700	
Nau	ne of Contact Person	at (702) 866-2500 Area Code & Daytime Telephone Number	
Enclosed is a \$35.0	O check made payable to the Departme	ent of State.	
	Mailing Address:	Street Address:	
	Amendment Section	Street Address: Amendment Section	
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
	Tallahassee, FL 32314	2661 Executive Center Circle	

CR2E045 (03/12)

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS H190000385163

Pursuant to the provisions of sections 607.0502, 617.0502, 6 statement of change is submitted for a corporation organized in order to change its registered office or registered.	d under the laws of the State of Florida	
1. The name of the corporation: Cre8ive Beginnings Of Fl	lorida Inc.	
2. The principal office address: 3705 South US Highway	Ste 301	
Riverview, FL 33578		
3. The mailing address (if different): 12587 Fair Lakes (Circle #503	
Fairfax, VA 22033		
4. Date of incorporation/qualification: 10/16/2014	Document number: P14000085469	
The name and street address of the current registered ager Florida Department of State: (If resigned, enter resigned)		
Akhtar, Syed Na	deem	
3705 S Us Hwy	301	
Riverview, FL 3	3578 v. 52	
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		
P.O. Box NOT acco	¬η:;;· ••	
Loxahatchee, FL	33470	
The street address of its registered office and the street add as changed will be identical.	ress of the business office of its registered agent,	
Such change was authorized by resolution duly adopted by authorized by the board, or the corporation has been notified		
s s	yed N Akhtar, President	
Signfulure of our afficies or director	Printed or typed name and title	
I hereby accept the appointment as registered agent and as I further agree to comply with the provisions of all statutes performance of my duties, and I am familiar with and acce agent. Or, if this document is being filed merely to reflect hereby confirm that the corporation has been notified in w	gree to act in this capacity. relative to the proper and complete pt the obligation of my position as registered a change in the registered office address, I riting of this change.	
Kimp.	January 23, 2019	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
Kim Barajas 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 (03/12)

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