

P160000078213



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(Requestor's Name)

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(Business Entity Name)

(Document Number)

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R. WHITE  
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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Think Creative Partners Inc

Name of Corporation

**DOCUMENT NUMBER:** P16000078343

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:

Gordon Alford

Name of Contact Person

Think Creative Partners Inc

Firm/Company

2660 NW 105th Lane

Address

Sunrise, FL 33322

City/State and Zip Code

gordon@thinkcreativepartners.com

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

For further information concerning this matter, please call:

Gordon Alford

Name of Contact Person

at ( 804 ) 687-4763

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 27, 2018

GORDON ALFORD  
2660 NW 105TH LANE  
SUNRISE, FL 33322

SUBJECT: THINK CREATIVE PARTNERS INC  
Ref. Number: P16000078343

We have received your document for THINK CREATIVE PARTNERS INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White  
Regulatory Specialist II

Letter Number: 518A00013319

**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: Think Creative Partners Inc
2. The principal office address: 3550 Galt Ocean Drive #1808  
Fort Lauderdale, FL 33308
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 09/26/2016 Document number: P16000078343

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)

THINK CREATIVE PARTNERS INC

3550 GALT OCEAN DRIVE #1808

FT LAUDERDALE, FL 33308

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

JOSEPH WALKOWIAK C/O  
J.I.S. TAX AND ACCOUNTING INC  
2660 NW 105 LANE  
SUNRISE, FL 33322

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

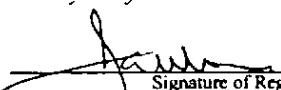
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

Gordon P. Alford, Co-Founder

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 of Registered Agent

June 19, 2018

Date

If signing on behalf of an entity:

JOSEPH WALKOWIAK  
\_\_\_\_\_  
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)