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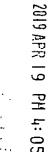
(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Creative Alliance Inc Name of Corporation
DOCUMENT NUMBER: P 1900000806
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:
Christy Lucas Name of Contact Person
Creative Alliance
400 WeSt MarlCet St, Ste 1400
Louisville Ky 40202 City/State and Zip Code
Christy, Lucas@Scopechio, Cow E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (502) 214 2945 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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: <u>Creative Alliance</u> , Inc
2. The principal office address: 1413 Haven Drive Ovlando, FL 32803
3. The mailing address (if different):
4. Date of incorporation/qualification: 12 28 18 Document number: P1900000800
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)
- Rebecca King
Orlando, P. 32803
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
(if changed): Christy Lucas
P.O. Box NOT acceptable
Ovlando, FL 32803
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 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.
Christy Cas 41810 Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR26045 (03/12)

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