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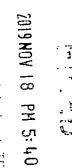
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Creative Transport Inc

Name of Corporation

DOCUMENT NUMBER: P19000013255

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:

Cristina M Marquez

Name of Contact Person

Firm/Company

14505 Commerce Way Suite 545

Address

Miami lakes, FL 33016

City/State and Zip Code

Cristina@creativeppec.com

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

For further information concerning this matter, please call:

Cristina M Marquez

_{...}786 \ 691-779

Name of Contact Person

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

4. Date of incorporation/qualification: 02/07/2019 Document number: P19000013255 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) ESTEFAN, ANGELA D (Resigned) 7220 FAIRWAY DRIVE, G1 MIAMI LAKES, FL 33014 5. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Cristina M Marquez 14505 Commerce Way Suite 545 PO. Box NOT acceptable Miami lakes, FL 33016 The street address of its registered office and the street address of the business office of its registered agent, se changed will be identical. uch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change. Angela D. Estefan, President Practical or typed name and title hereby accept the appointment as registered agent and agree to act in this equacity; further agree to comply with the provisions of all statutes relative to the proper and complete erformance of my daties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed mereby to reflect a change in the registered office address, I get on confirm that the corporation has been notified in writing of this change. 11/11/2019	2. The principal office address: 14505 Commerce Way Suite 54 Miami lakes, FL 33016 3. The mailing address (if different): 4. Date of incorporation/qualification: 02/07/2019 Document in 5. The name and street address of the current registered agent and registered Florida Department of State: (If resigned, enter resigned) ESTEFAN, ANGELA D (Resigned) 7220 FAIRWAY DRIVE, G1 MIAMI LAKES, FL 33014	umber: P19000013255
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Signature of Registered Agent Date	hereby account the approintment as maniety of	
	11/11/2019	
	Signature of Registered Agent Signing on behalf of an entity:	Date

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)