## P21000093738

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	ΓΙΟΝ:	CREOVATIONS INC.	
DOCUMENT NUMBER		P21000093738	
	Amendment and fee are su	bmitted for filing.	
•	ndence concerning this ma		
rease retain an correspon	identity contact ming time ma		
<u> </u>		LOVETTE DOBSON	
		Name of Contact Person	
		Firm/ Company	
		17350 STATE HWY 249,	#220
·	Address		
		HOUSTON, TX, 77064	_ <del></del>
		City/ State and Zip Code	<b>:</b>
		EFILE1234@INCFILE.CO	
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	oncerning this matter, pleas	se call:	
LOVETT	TE DOBSON	at (1	888-462-3453
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Divisio P.O. Bo	g Address ment Section n of Corporations ox 6327 ssee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

CREOVATIONS INC.

(Name of Corporation as curren	itly filed with the Florida Dept. of State)	
P21000	0093738	
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the fo	ollowing amendment(s
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must	
B. Enter new principal office address, if applicable:	543 River Plantation Rd.	
(Principal office address MUST BE A STREET ADDRESS)	Crawfordville, FL 32327	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	543 River Plantation Rd.	
	Crawfordville, FL 32327	u .
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addresses.		: 50
Name of New Registered Agent		
(Florida	street address)	
New Registered Office Address:	(City) , Florida_	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		sition.
Signature of New	Registered Agent, if changing	<del></del>
Ç ,		
Check if applicable  ☐ The amendment(s) is/arc being filed pursuant to s. 607.0120 (1)	1) (e), F.S.	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Ryan Gregory	543 River Plantation Rd.
Add		<del></del>	Crawfordville, FL 32327
Remove			
2) Change			
Add			
Remove 3) Change			
Add			· · · ·
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
	-
	·
<del></del>	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<del></del>	

. .

The date of each amendment(s	adoption:		, if other than the
date this document was signed.			
Effective date if applicable:			
	(no more	than 90 days after amendmer	it file date)
<b>Note:</b> If the date inserted in the document's effective date on the	s block does not meet the Department of State's rec	applicable statutory filing roords.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ON	<u>5</u> )	
The amendment(s) was/were action was not required.	adopted by the incorporate	ors, or board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were		rs. The number of votes cast	for the amendment(s)
☐ The amendment(s) was/were must be separately provided	approved by the sharehold for each voting group enti	lers through voting groups. Titled to vote separately on the	he following statement amendment(s):
"The number of votes of	ast for the amendment(s)	was/were sufficient for appro-	val .
by	<u></u>	<u> </u>	"
	(voting group)		
	1BER, 09, 2021	_	
Dated	<del></del>		
Signature			
(By		ner officer – if directors or off if in the hands of a receiver, duciary)	
	Ryan Gregory		
	(Typed or	printed name of person signin	g)
	President	wan Grego.	y
	(Title of po	son signing)	