

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000122825

**Entity Name:** CRYPTOCRAZE LLC

**Current Principal Place of Business:**

11319 NW 44 TERRACE  
DORAL, FL 33178

**Current Mailing Address:**

11319 NW 44 TERRACE  
DORAL, FL 33178 UN

**FEI Number:** 61-1889302

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FALENI, MICHEL R  
11319 NW 44 TERRACE  
DORAL, FL 33178 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	FALENI, MICHEL	Name	FALENI, ANDREINA
Address	11319 NW 44 TERRACE	Address	11319 NW 44 TERRACE
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHEL FALENI

**MGR**

**02/19/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date