

LO4000017210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

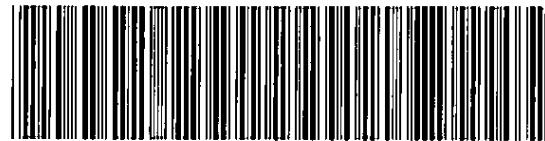
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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CLERK'S OFFICE
ATLAHAKSEE, FLA

RECEIVED

R.A.Ratch

SEP 17 2021
ALBRITTON

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 995845 7855256

AUTHORIZATION

COST LIMIT : \$25.00

ORDER DATE : September 13, 2021

ORDER TIME : 3:22 PM

ORDER NO. : 995845-056

CUSTOMER NO: 7855256

CHANGE OF AGENT

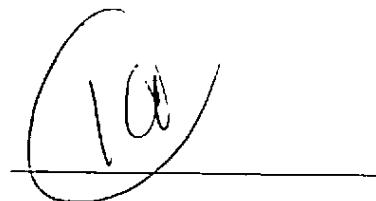
NAME: CRESCENT ONE, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

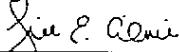


STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	CRESCENT ONE, LLC		
2. (a) 10600 W Charleston Blvd	Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i>	(b) 10600 W Charleston Blvd	Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i>
Las Vegas, NV 89135		Las Vegas, NV 89135	
3. Date of filing/registration in Florida	4.	Document number	
5. (a) NRAI SERVICES, INC	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1200 South Pine Island Road Registered Office Address <i>(MUST BE FLORIDA STREET ADDRESS)</i>		
Plantation		33324	FL
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : Corporation Service Company <u>NEW</u> Registered Office Address: 1201 Hays Street			
Tallahassee		32301	FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

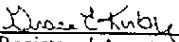


Jill Cilmi, Authorized Person

Signature of a member or authorized representative of a member

Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



Signature of Registered Agent

Grace E. Kirby, Asst. Vice President of Corporation Service Company

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

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