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MARO 2 2016

COVER LETTER

Division of Corporations
SUBJECT: KREA SLOBAL, LLC Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
SONIA GARCIA Name of Person
Name of Person
KREA SLOBAL, LLC
Firm/Company 1800 PURDY DU, APT 2015 (Street has a second Name 1800 SUNSET HAR DR Address
MIAMI BEACH, FL 33139 City/State and Zip Code
Sonia garcía & Kreas bod. (cm E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SONIA SANCIA at (786) 472828) Production Tolor First Nitrobars
SONIA SANCIA at (786) 472828) TO T
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32301

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

Enclosed is a check for the following amount:

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. Na	me of the limited liability company: KREA SLOBAL,	, LLC	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limite (Note: MAY BE POS	ed liability company: ST OFFICE BOX) C 33139
	0-11 60 1 6003	.05000095	283
3.	Date of filing/registration in Florida 4.	Document number	
(b) <u>.</u>	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 2600 S. DOVSUAS RUAD SUITE 805 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) (O(a) Salv) FL 33/34 SON) A SARCIA Enter name of NEW Registered Agent and/or NEW Registered Office address: 1800 PURDY AV # 2015 NEW Registered Office Address: MIDMI BEACH FL 33/39		
the charagent was/we the artic	mited liability company is not organized under the laws of the State of Flange or changes are made, the Florida street address of the registered official be identical. Or, in the case of a Florida limited liability company, it is re authorized by an affirmative vote of the members of the limited liability corrected or organization or the operating agreement of the limited liability corrected organization or the operating agreement of the limited liability corrected organization or the operative of a member by accept the appointment as registered agent and agree to act in this cappose of all statutes relative to the proper and complete performance of my gations of my position as registered agent as provided for in Chapter 60. It is reflect a change in the registered office address, I hereby confirm that	is hereby confirmed ity company or as other mpany. Printed or typed name	ffice of the registered that the change(s) nerwise provided in of signee
notifiea	in writing of this change	· ····································	Tampany nan avan

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

Signature of Registered Agent