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☐ PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)	i.
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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

<b>TO:</b> Registration Section Division of Corporations			
SUBJECT: CRE Holdings LLC	Limited Liability Company)		
(ivanic or	Limited Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for fili	ng.	
Please return all correspondence concerning	g this matter to the following:		ı
Gary R. Grothe			
(Name of Person)			
CRE Holdings LLC (Firm/Company)		SECRE	07 OCT -! AMII: 27
,			
750 North Drive		1997 1974	
(Address)		ESSE ESSE ESSE ESSE ESSE ESSE ESSE ESS	
Melbourne, FL 32934-9281		<b>₽</b> H	27
(City/State and Zip Code)			
For further information concerning this ma	itter, please call:		
Gary R. Grothe	at (321 ) 409-9898 Ext 313		
(Name of Person)	(Area Code & Daytime Telepho	one Num	iber)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the follow	ing amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limit	ed liability company is:	CRE Holdir	ngs LLC		·
2. The mailing address of	of the limited liability co	ompany is: _			
750 North Drive, Melbo	ourne, FL 32934-9281	1		- <u>-</u>	· .
November 15, 2005			L05000112	334	
3. Date of filing/registra	tion in Florida	*** <del>-</del>	4. Documen	t number	
5. The name of the regist Florida Department of		stered office	address as sho	own on the rec	cords of the
· ·	Cary I a. Crounc	Name	_	<del>_</del>	-
	305 East Drive, S				<u>~</u>
	Melbourne, FL 32	Address 904 State and Zi	p	<del></del>	07 OC.
6. The name and address	•	,	-		五二
	Gary R. Grothe  750 North Drive  Florida street address	Name	NOT acceptal	ole)	OT OCT-1 AM 11: 27 SECRES E FLORIDA
	Melbourne,	FL 3293	34-9281		
	City, S	State and Zip	<del>-</del>		
If the limited liability co- confirmed that after the cand the business office of liability company, it is ho of the members of the li- or the operating agreement	change or changes are made the registered agent we confirmed that the mited liability company	nade, the Flor vill be identica e change(s) w v or as otherw	rida street add al. Or, in the vas/were auth	lress of the re case of a Flor orized by an a	gistered office rida limited affirmative vote
(Signature of a member or author	rized representative of a memb	per)	ii Alies		•
Gary R. Grothe (Printed or typed name of signed	<del></del> ,		· su salt	· -	,
I hereby accept the appe comply with the provisio and I am familiar with a Chapter 608, F.S. Or, if address, I hereby confin	nintment as registered a ns of all statutes relative nd accept the obligation this document is being n that the limited liabili	ngent and agr e to the prop ns of my posit filed to mere ity company h	ree to act in the er and compli- tion as registe ly reflect a ch ias been notif	nis capacity, lete performan red agent as ange in the re led in writing	I further agree to ice of my duties, provided for in egistered office of this change.
(Signature of Registered Agent)	_				

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