

L11000036218

(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



200201855812

04/15/11--01025--001 \*\*25.00

FILED  
2011 APR 15 PM 09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

APR 18 2011

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NewCrescent Trading 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:

Luis Navia

Name of Person

NewCrescent Trading LLC

Firm/Company

260 Crandon Blvd, Suite 32-207

Address

Key Biscayne, Florida 33149

City/State and Zip Code

newcrescent2011@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis Navia

Name of Person

at ( 786 )

314-1993

Area Code & Daytime Telephone Number

**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 following 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. Name of the limited liability company: NewCrescent Trading LLC

2. (a) Principal office address of limited liability company: 260 Crandon Blvd. Suite 32-207

**(Note: MUST BE STREET ADDRESS)**

Key Biscayne Florida 33149

(b) Mailing address of limited liability company: 260 Crandon Blvd, Suite 32-207

**(Note: MAY BE POST OFFICE BOX)**

Key Biscayne, Florida 33149

03/25/2011

L11000036218

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Department of State:

Registered Agent:

Luis Navia

Registered Office Address:

260 Crandon Blvd, Suite 32-207  
Key Biscayne, Florida 33149

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

Ruben Oliva Esq.

NEW Registered Office Address:

**(MUST BE FLORIDA STREET ADDRESS)**

15800 Pines Blvd

Suite 206

Pembroke Pines, FL 33027

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.

Signature of a member or authorized representative of a member

Luis Navia

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 608, 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

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**

**FILING FEE: \$25.00**