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(Re	equestor's Name)		
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificate:	s of Status	
Special Instructions to Filing Officer:			





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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	MCRA USA INVESTMENTS	, LLC			
,, OIA,		Name of Limited Liability Company			
Dear Si	r or Madam:				
The end	closed Registered Agent/Registered	l Office Change and	fee(s) are submitted for filing.		
Please	return all correspondence concerni	ng this matter to the	following:		
Mario I	.ai				
	Name of Person				
	Firm/Company				
260 Cra	undon Blvd, Unit 29-30				
	Address				
Key Bi:	scayne, FL 33149				
	City/State and Zip Co	ode			
mario.la	ni300@gmail.com				
—Е	-mail address: (to be used for futur	e annual report notif	ication)		
For fur	ther information concerning this m	atter, please call:			
Mario I	.ai	786 at (502-1999)		
	Name of Person		Area Code & Daytime Telephone Number		
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the follo	wing 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 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: MCRA USA IN	NVESTMENTS, LLC
2. (a) 260 Crandon Blvd. Unit 29-30	(b) 260 Crandon Blvd. Unit 29-30
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Key Biscayne	Key Biscayne
Florida, 33149	Florida, 33149
6/28/13	<u> </u>
3. Date of filing/registration in Florida	4. Document number
5. (a)	
Registered Agent and Registered Office shown on the records DOUGLAS REGISTERED AGENTS, LLC	of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREE	
2600 S. Douglas RD, Suite 510	9021 FA
Coral Gables	SECRE JAN 1
(b)	red Office address:
	red Office address:
Mario Lai	- IE 19
NEW Registered Office Address:	
260 Crandon Blvd, Unit 29-30	
Key Biscayne	FL 33149
change or changes are made, the Florida street address of the agent will be identical. Or, in the case of a Florida limited	laws of the State of Florida, it is hereby confirmed that after the he registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) s of the limited liability company or as otherwise provided in the limited liability company. Mario Lai
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 a provisions of all statutes relative to the proper and complet the obligations of my position as registered agent as provide to merely reflect a change in the registered office address, notified in writing of this change.	gree to act in this capacity. I further agree to comply with the te performance of my duties, and I am familiar with and accept led for in Chapter 605, F.S. Or, if this document is being filed I hereby confirm that the limited liability company has been
Signature of Registered Agent	
Cognition of regionalest regent	