L13000098502

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
MAIT	MAIL							
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Statu								
Special Instructions to Filing Officer:								
	dress) by/State/Zip/Phone WAIT siness Entity Nar cument Number)							

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FEB 03 2014 O. CARROTHERS

COVER LETTER

Division of Corporations	
SUBJECT:	
	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:
Clark Thompson	
Name of Person	
Firm/Company	
2206 South Cypress Bend Drive Suite 80	05
Address	
Pompano Beach FL 33069	
City/State and Zip Code	
clark@finunited.com	
E-mail address: (to be used for future annua	al report notification)
For further information concerning this matter, p	lease call:
Clark Thompson	954 861-9444
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following a	mount:
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

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: Crush Ad Med	dia LL	<u>C</u>			, _	
		Principal office address of limited liability company:			Mailing address of limits			
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limite (Note: MAY BE POS			:
		2206 S. Cypress Bend Drive, Suite 805		2206 S.	. Cypress Bend D	rive, Sui	te 80	5
		Pompano Beach, Florida 33069		Pompai	no Beach, Florida	33069		
		07/11/2013		L130000	98502			
3.		Date of filing/registration in Florida	4.		Document number			
5	(a)							
J.	(4)	Registered Agent and Registered Office shown on the records of t	he Flori	da Dept. of Sta	ite:			
		United States Corporation Agents, Inc.						
		Registered Office Address (MUST BE FLORIDA STREET)	IDDRE	227	-			
		13302 Winding Oaks Court, Suite A						
		Tampa	3361	2				
		, rL				\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
	(b)						<u>د</u>	. 2002
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office :	ddress:				ន៖ ឯកស ម ស
		Kenneth D. Kossow, Esq.				設負置の	30	140 240 240 240 240 240 240 240 240 240 2
		NEW Registered Office Address:				声点	Dts 102	Carl
		1325 Diplomat Pkwy				22	Ş	
						Sp.	က္ခ	
		Hollywood , FL	3301	9				
th ag w	e cha gent v as/w e art	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of organization or the operating agreement of the	the reability of the limite	gistered office company, it imited liabiled liability co	ce and the business of its hereby confirmed ity company or as of ompany.	office of the that the cl	ie regis hange(stered (s)
Z		arl Nompeon	<u>c</u>	lark Thom	·	of giones		
pi to no	here rovis le ob men otifie	dure of a member or authorized representative of a member aby accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I d in writing of this change.	ree to d perfoi d för i hereby	act in this ca mance of m n Chapter 60 confirm tha	Printed or typed name pacity. I further agree y duties, and I am jac 105, F.S. Or, if this dut the limited liability	ree to com	ply wit a and a being has be	th the accept filed een

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