140000 11304

(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 27, 2018

ISAURA H MOORE 4900 N OCEAN BLVD UNIT 1621 LAUDERDALE BY THE SEA, FL 33308

SUBJECT: CRYSTAL MARIE TWO, LLC

Ref. Number: L14000011304

We have received your document for CRYSTAL MARIE TWO, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORP, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 418A00026409

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CRYSTAL MARIE TWO, LLC Name of Limited Liability Company	2019 2019
Dear Sir or Madam:	JAN 17
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	_ ;
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:	A 2: 19
ISAURA H MOORE Name of Person	2019.
Crystal Marie Two, LLC Firm/Company	2019 JEN 17
4900 North Ocean Blud, Unit #1621 Address	VI. 10: 6.6
Landerdale By The Sea, FL 33308 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
1 Saura H Moore at (561) 289 - 6620 Name of Person Area Code & Daytime Telephone Num	 ıber
STREET/COURIER ADDRESS: Registration Section MAILING ADDRESS: Registration Section	

Tallahassee, Florida 32301

Enclosed is a check for the following amount:

□ \$25 Filing Fee

Clifton Building

Division of Corporations

2661 Executive Center Circle

☐ \$55 Filing Fee & Certified Copy

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

.:

'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

2. (· · · · · · · · · · · · · · · · · · ·	g address of limited liability company; te: MAY BE POST OFFICE BOX)
	01. 21. 2014 L140	00011 304
3.	Date of filing/registration in Florida 4. Docu	ument number
5.	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 4900 North Ocean Blud, Unit#1621, Lande Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	1 dal是13 A A FC-3330
ı	(b) Saura H Moore Enter name of NEW Registered Agent and/or NEW Registered Office address:	2: 19 STATE STATE LORIUM
	4900 North Ocean Blud, Unit #	1621
	NEW Registered Office Address:	
the age was	f the limited liability company is not organized under the laws of the State of Florida, he change or changes are made, the Florida street address of the registered office and igent will be identical. Or, in the case of a Florida limited liability company, it is here was/were authorized by an affirmative vote of the members of the limited liability company he articles of organization or the operating agreement of the limited liability company	the business office of the registered eby confirmed that the change(s) npany or as otherwise provided in
	Signature of a member or authorized representative of a member Print	

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

Signature of Registered Agent