

L1400014,7985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

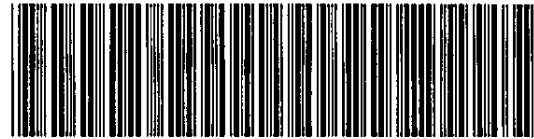
(Business Entity Name)

(Document Number)

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FILED  
18 APR 23 PM 4:09  
TALLAHASSEE, FLORIDA  
CLERK OF SUPERIOR COURT

J. LEGGETT  
APR 24 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 4, 2018

STEVEN ROSA PAGAN  
17042 NW 22ND ST  
PEMBROKE PINES, FL 33028

SUBJECT: PAGAN & ASSOCIATES CRES, LLC  
Ref. Number: L14000147985

We have received your document for PAGAN & ASSOCIATES CRES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

On the application number #5 section (B) must include the name of the new registered agent

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.

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 118A00006771

RECEIVED  
2018 APR 20 PM 1:46  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Pagan & Associates CRES, 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:

Steven Rosa Pagan  
Name of Person

Pagan & Associates CRES, LLC  
Firm/Company

17042 NW 22nd ST.  
Address

Pembroke Pines, FL 33028  
City/State and Zip Code

Paganassociatescres@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven Rosa Pagan at ( 954 ) 348-2622  
Name of Person 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 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: Pagan & Associates CRES, LLC
2. (a) 17042 NW 22nd Street (b) 17042 NW 22nd Street  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)  
Pembroke Pines, FL 33028 Pembroke Pines, FL 33028

3. 11/27/2017 4. L14000147985  
Date of filing/registration in Florida Document number

5. (a) Corporation Service Company  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
17042 NW 22nd Street  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

FILED  
18 APR 23 PM 10:49  
TALLAHASSEE, FLORIDA

- Pembroke Pines, FL 33028  
STEVEN ROSA PAGAN  
S.R.P. 15683 Stone House Drive, Brooksville, FL  
(b) 15683 Stone House Drive, Brooksville, FL  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

- S.R.P. 15683 Stone House Drive  
**NEW Registered Office Address:**  
15683 Stone House Drive, B  
Brooksville, FL 34604

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.

S.R.P.  
Signature of a member or authorized representative of a member

STEVEN ROSA Pagan  
Printed or typed name of signer

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 605, 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.

S.R.P.  
Signature of Registered Agent