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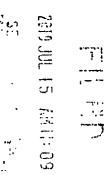
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## **COVER LETTER**

TO: Registration Section Division of Corporations					
SUBJECT: CRG Garage, LLC					
(Name of I	Limited Liability Con	npany)			
The enclosed member, resignation or disse	ociation and fee(s	) are submitted for filing.			
Please return all correspondence concerni	ng this matter to:				
Mery Lopez, Esq.					
(Contact Person)		-			
Mery Lopez, P.A.					
(Firm/Company)		-			
260 Hialeah Drive					
(Address)	· · · · · · · · · · · · · · · · · · ·	-			
Hialeah, FL 33010					
(City/State and Zip Code)	<del></del>	-			
For further information concerning this m	atter, please call:				
Scott Salomon	305	882-2739			
(Name of Contact Person)		& Daytime Telephone Number)			
Enclosed please find a check made payabl  \$25 Filing Fee		epartment of State for: Fee & Certified Copy			
STREET/COURIER ADDRESS:		MAILING ADDRESS:			
Registration Section		Registration Section			
Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327			
2661 Executive Center Circle		Tallahassee, Florida 32314			

Tallahassee, Florida 32314

CR2E079 (2/14)

Tallahassee, Florida 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOILIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compansubmits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company:	CRG Garage, LLC					
2. (a)	4300 NW 22nd Avenue, Miami	i, FL 33142	(b)				
<i></i> ( <i>a</i> )	Principal office address of limited lia (Note: MUST BE STREET A	(0)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
3. 5. (a)	March 23, 2016  Date of filing/registration in Ezequiel Rial	ı Florida		Document number			
	Registered Agent and Registered Office show	wn on the records of	the Florida Dept.	of State:			
	Registered Office Address (MUST BE F	LORIDA STREET	ADDRESS)				
	Miami		33127	<del></del>	E 0.7	1816 JUL	
(b)	Hannie Chahin				_	JUL 15	* <u>*</u>
	Enter name of <u>NEW Registered Agent</u> and 4300 NW 22nd Avenue	or <u>NEW Registered</u>	Office address:		-7°.		
	NEW Registered Office Address:				. *	وں	
	Miami	, FL	33142				
the cha agent v was/we	imited liability company is not organing or changes are made, the Florida vill be identical. Or, in the case of a creauthorized by an affirmative vote cles of organization or the operating	street address of Florida limited li of the members o	the registered ability compar of the limited l	l office and the bus ny, it is hereby con iability company o ty company.	iness of firmed th	fice of the c	he registered :hange(s)
Signer	tage of a member of authorized representative		Printed or typed name of signee				
provisi the obl to merc	by accept the appointment as register ons of all statutes relative to the projections of my position as registered by reflect a change in the registered failing of this change.	red agent and agi per and complete agent as provide office address, I	ree to act in th performance d for in Chapt hereby confirm	is capacity. I furth of my duties, and I er 605, F.S. Or, if n that the limited h	ier agree am fami this doc ability c	e to com iliar wit nument i. company	ply with the h and accept s being filed has been