

L230000282205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

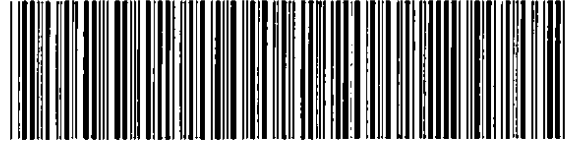
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200419220792

11/27/23--01015--006 **30.00

2023 NOV 27 AM 8:10
DEPARTMENT of STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

A. PARISHANI

DEC 10 2023

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: CREA COMMUNICATIONS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROQUE JAVIER CORREA

Name of Person

CREA COMMUNICATIONS LLC

Firm/Company

1177 CLINGING VINE PL

Address

WINTER SPRINGS, FL 32708

City/State and Zip Code

rocoghi@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roque J. Correa

407 539-4439
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32303

2023 NOV 27 AM 8:10

FILED

FILED
2023 NOV 27 AM 8:10
CLERK OF COURT
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	OLGA CRISTINA RESTREPO	1177 Clinging Vine Pl. Florida, 32708	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2023 NOV 27 AM 8:19
FLA. DEPT. OF STATE
DIVISION OF CORPORATION
TALLAHASSEE, FL 32307

FILED

2023 NOV 27 AM 8:10
DEPARTMENT OF S.H.I.
DIVISION OF CORPORATE
TALLAHASSEE, FLORIDA

U.S. DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2023 NOV 27 AM 8:10

ד
ה
ה
ד

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated November 3, 2023

Signature of a member or authorized

Signature of a member or authorized representative of a member

Rogue  Correa

Typed or printed name of signee

Filing Fee: \$25.00