## M1200000 2725

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## COVER LETTER

**TO:** Registration Section Division of Corporations

 $_{
m SUBJECT:}$  CRESCENT ST PETE, L.L.C.

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:

TIMOTHY J. BRADLEY

Name of Person

**BRADLEY & MOREAU** 

Firm/Company

1318 CAMELLIA BOULEVARD

Address

LAFAYETTE, LA 70508

City/State and Zip Code

tim@realtitle.net

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

For further information concerning this matter, please call:

Timothy J. Bradley

<sub>ar</sub>337

235-4660

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 608.416 or 608.508, 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: CRESCENT ST PETE, L	L.C.	
2. (a) Principal office address of limited liability company:	103 ROSEDALE DRIVE	
(Note: MUST BE STREET ADDRESS)	LAFAYETTE, LA 70508-9104	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME	
May 15, 2012	M12000002725	
3. Date of filing/registration in Florida 4	. Document number	
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:	
Registered Agent:	ROBERT GRIFFITS	
Registered Office Address:	5217 81ST ST. N #10 ST. PETERSBURG, FL 33709	
(1) Francisco CNEW Davids and A. H. NEW	105 13 C	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	Registered Office address	
NEW Registered Agent:	IVONNE ROSADO	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8609 POSTWOOD CIRCLE	
	TAMPA 9 FL 33644	
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identically company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	orida street address of the registered office	
RICHARD PAUL BEAULLIEU		
Printed or typed name of signee  I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the provision and I am familiar with and accept the obligations of my poss Chapter 608, h.S Or, if this document is being filed to mer address, I hereby/gonfirm that the limited liability company  Signature of Registard Agent  Division of Corporations, P.O. Box 632	7, Tallahassee, FL 32314	
FILING FEE: \$25.00		