## P0100099643

(Requestor's Name)	—
(Address)	
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(City/State/Zip/Phone #)	
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SEURETARY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

SUBJECT: THE CREW INC.  Name of Corporation  DOCUMENT NUMBER:  The enclosed Statement of Change of Registered Office/Agent and fee are submitted for for the Please return all correspondence concerning this matter to the following:  SAMUEL BELTRAM  Name of Contact Person  Address  3640 YATCH CLUB DR - 902  Address	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for for the Please return all correspondence concerning this matter to the following:  SAMUEC BECTRAN  Name of Contact Person  THE CREW INC.  Firm/Company	-
Please return all correspondence concerning this matter to the following:  SAMUEC BECTRAN  Name of Contact Person  THE CREW INC.  Firm/Company	-
SAMUEL BECTRAN  Name of Contact Person  Saluce / THE CREW INC.  Firm/Company	filing.
Firm/Company	
Firm/Company	
	-
3640 YATCH CLUB DR 902	
	_
AVENTURA/FL/33180  City/State and Zip Code	_
thecrewine 13@ yahoo.com	
E-mail address: (to be used for future annual report notification)	<u>.</u> !
For further information concerning this matter, please call:  SAMUEL BECTRAN  at (7.54) 234 133	2/
SAMUEL BECTRAN at (7.54) 234.133  Name of Contact Person Area Code & Daytime Telep	phone Number
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address: Amendment Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	r Circle

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: THE CREW IMC.
2. The principal office address: 3450 WEST-84 St 202 K
HIACEAH, FC, 33018
3. The mailing address (if different): 1925 Yennedy Orive 104
mclean, Va 22102
4. Date of incorporation/qualification: 10/09/2001 Document number: P01000099643
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
SAMUEL BELTRAN
3450 WEST-84 St- ZOZK
HIALEAH, FC, 33018
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
3640 YATCH CLUB DR 902 = Mail
AVENTURA, FL, 33180
P.O. Box NOT acceptable
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.
SAMUEL BELTRAN/PRESIDENT  Signature of an officer or director  Printed or typed name and title
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Gallian 07/13/12
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

\* \* \* FILING FEE: \$35.00 \* \* \*