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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: CRECER CONSTRUCTION, INC

Name of Corporation

DOCUMENT NUMBER, P100004

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NELLY CARMONA

Name of Contact Person

CRECER CONSTRUCTION, INC

Firm/Company

150 SE 12 STREET, SUITE 400

Address

FORT LAUDERDALE, FL 33316

City/State and Zip Code

A.URTUBIA@CRECERCONSTRUCTION.COM

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

For further information concerning this matter, please call:

NELLY CARMONA

,954 983-

Name of Contact Person

Area Code & Daytime Telephone 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508 , or 617.1508 , Florida organized under the laws of the State of	FLORIDA
		registered agent, or both, in the State of I	Florida.
1. The name of	the corporation: CRECER CC	ONSTRUCTION, INC	
2. The principal	office address: 1712 SW 9TH	AVENUE, FORT LAUDERDALE	E, FLORIDA 33315
3. The mailing a	ddress (if different): 150 SE 12 S	TREET, SUITE 400, FORT LAUDERD	ALE, FLORIDA 33316
4. Date of incorp	poration/qualification: 05/25/20	Document number: P1200	00048612
	street address of the current regist trent of State: (If resigned, enter r	ered agent and registered office on file wesigned)	ith the
	URTUBIA, AURELIO		
	1712 SW 9TH AVENUE		
	FORT LAUDERDALE, F	LORIDA 33315	
6. The name and (if changed):	d street address of the new registere	ed agent (if changed) and /or registered of	in the second
	CARMONA, NELLY		罗西西
	1712 SW 9TH AVENUE		T M
	FORT LAUDERDALE, I	ox NOT acceptable FLORIDA 33315	, §. 🐯
The street addre	ess of its registered office and the be identical.	street address of the business office of it	ts registered agent,
Such change wa authorized by th	as authorized by resolution duly ache board, or the corporation has be	dopted by its board of directors or by an een notified in writing of the change.	officer so
1		NELLY CARMONA, Vice P	
I hereby accept I further agree to performance of agent. Or, if th	to comply with the provisions of a	Printed or typed name and til ent and agree to act in this capacity. Il statutes relative to the proper and con and accept the obligation of my position to reflect a change in the registered offic ified in writing of this change.	nnlete
V		February 10, 2015	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
NELLY CA			
T	yped or Printed Name		

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