

P13000003226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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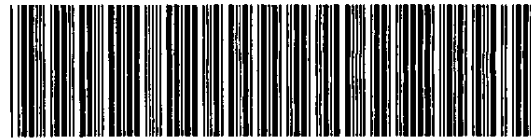
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 26 2017

S. YOUNG

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** NAD CREATION CORPORATION  
Name of Corporation

P13000003226  
**DOCUMENT NUMBER:**

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:

T. SAVINEAU

Name of Contact Person

MCR PARTNERS, INC.

Firm/Company

20533 BISCAYNE BLVD (1301)

Address

MIAMI, FL 33180

City/State and Zip Code

MCRPARTNERS@YAHOO.COM

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

For further information concerning this matter, please call:

T. SAVINEAU

305 725-7405

Name of Contact Person at ( ) 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**

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

**NAD CREATION CORPORATION**

1. The name of the corporation: \_\_\_\_\_  
2. The principal office address: 1420 CELEBRATION BLVD. (SUITE 200)  
CELEBRATION, FL 34747  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 01/10/2013 Document number: P13000003226

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)

ELMALEH, VANESSA

407 LINCOLN RD (12F)

MIAMI, FL 33139

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

MCR PARTNERS, INC.

20533 BISCAYNE BLVD (1301)

P.O. Box NOT acceptable

MIAMI, FL 33180

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.

Elyane Masse

Signature of an officer or director

ELYANE MASSE

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.*

[Signature]  
Signature of Registered Agent

09/18/2017  
Date

If signing on behalf of an entity:

T. JAWNEAU for MCR PARTNERS, INC.  
Typed or Printed Name

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