## P20000031140

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DATE: 02/09/22

NAME: CREF INTERNATIONAL INC

TYPE OF FILING: CHANGE OF REGISTERED AGENT

COST: 35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: CREF INTERNATIONAL INC Name of Corporation
Traine of Corporation
DOCUMENT NUMBER: P20000031140
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:
Camille Seibel
Name of Contact Person
CREF
Firm/Company
1900 N. Pearl Street
Address
Dallas, TX, 75201
City/State and Zip Code
cseibel@cref.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Camille Seibel at (949) 554-4800  Name of Contact Person at (949) Area Code & Daytime Telephone Number
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  Street Address: Amendment Section

Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

statement of ch	nange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida
		registered agent, or both, in the State of Florida.
1. The name of	f the corporation: CREF INTERNAT	IONAL INC
2. The principal Pocasset, MA 0	al office address: <u>802 MacArthur Bou</u> 02559	levard
3. The mailing	address (if different): P.O. Box 58, A	Assonet, MA 02702
	rporation/qualification: 4/21/2020	Document number: P20000031140
	nd street address of the current regist artment of State: (If resigned, enter r	tered agent and registered office on file with the resigned)
	CROWLEY, MICHAEL	
	6767 N. WICKHAM RD., STE. 10	9
	MELBOURNE, FL 32940	
6. The name ar (if changed):		ed agent (if changed) and /or registered office
	CCS GLOBAL SOLUTIONS, INC	7972
	155 OFFICE PLAZA DRIVE	75.7
	TALLAHASSEE, FL 32301	P.O Box NOT acceptable
The street addrass changed wil	ress of its registered office and the	street address of the business office of its registered agent.
Such change wanthorized by	vas authorized by resolution duly a the board, or the corporation has be	dopted by its board of directors or by an officer so
	2	Robert Gendron, President
	nire of an afficer or director	Printed or typed name and title
I hereby accep I further agree of my duties, a document is be corporation ha	of the appointment as registered age to comply with the provisions of a and I am familiar with and accept the eing filed merely to reflect a change as been notified in writing of this cl	ent and agree to act in this capacity. Il statutes relative to the proper and complete performance ne obligation of my position as registered agent. Or, if this e in the registered office address, I hereby confirm that the nange.
		2/9/2022
Sì	gnature of Registered Agent	Date
lf signing on b	ehalf of an entity:	
Joanne Caswell	, Assistant Secretary	
	Typed or Printed Name	
	+ + + 1711 TB	W TOT OTE ON 4 = 4

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