P9800011145

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100317840501

09/04/18--01020--019 **35.00

2011 SEP - U P Que 22

SEP - 7773



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CRE Properties, Inc.
Name of Corporation
DOCUMENT NUMBER: P98000071145
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:
Susan W. Greenfield
Name of Contact Person
BankUnited, N.A.
Firm/Company
14817 Oak Lane
Address
Miami Lakes, FL 33016
City/State and Zip Code
Sgreenfield@bankunited.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jeannette Extramil 786 313-1028
Jeannette Extramil Name of Contact Person at (786) 313-1028 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	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this cange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: CRE Properties, Inc.
2. The principal	office address: 14817 Oak Lane Miami Lakes, FL 33016
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 08/12/1998 Document number: P98000071145
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Lewellyn Kamin
	7815 NW 148 Street
	Miami Lakes, FL 33016
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Anabel Nemrow
	7815 NW 148 Street
	Miami Lakes, FL 33016
The street address changed will	ess of its registered office and the street address of the business office of its registered agent. I be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer se he board, or the corporation has been notified in writing of the change.
Signatu	Susan W. Greenfield, Secretary Printed or typed name and title
I further agree t performance of agent. Or, if the	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
and	08/13/2018
-	mature of Registered Agent Date
ii signing on be	chalf of an entity:
Ty	yped 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 * * *