I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KAKHABER KOGUASHVILI

Electronic Signature of Signing Authorized Person(s) Detail

Ρ

Electronic Signature of Registered Agent

SIGNATURE: KOBA KOBERIDZE

Authorized Person(s) Detail :			
Title	MGRM	Title	MANEGER
Name	KOGUASHVILI, KAKHABER G	Name	KOBA, KOBERIDZE
Address	18101 COLLINS AVENUE, UNIT 4904	Address	500 THREE ISLANDS BLVD APT 105
City-State-Zip:	SUNNY ISLES FL 33160	City-State-Zip:	HALLANDALE FL 33009

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Name and Address of Current Registered Agent:

KOBA, KOBERIDZE 500 THREE ISLANDS BLVD 105 HALLANDALE, FL 33009 US

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000067226

Entity Name: PREMIERE RELOCATION SERVICES LLC

Current Principal Place of Business:

18101 COLLINS AVENUE, UNIT 4904 SUNNY ISLES, FL 33160

Current Mailing Address:

18101 COLLINS AVENUE, **UNIT 4904** SUNNY ISLES, FL 33160 US

FEI Number: 27-0576807

FILED Feb 28, 2017 Secretary of State CC3569151339

02/28/2017

Date

Certificate of Status Desired: No

02/28/2017 Date