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.

MGR

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.

SIGNATURE	E: DOMINIQUE ANDROUIN					
	Electronic Signature of Registered Agent	Date				
Authorized Person(s) Detail :						
Title	MGR	Title	MGR			
Name	SHAFTAL, ISAAC A	Name	ANDROUIN, DOMINIQUE N			
Address	7928 WEST DRIVE #309	Address	7928 WEST DRIVE #309			
City-State-Zip:	NORTH BAY VILLAGE FL 33141	City-State-Zip:	NORTH BAY VILLAGE FL 331	41		

# Name and Address of Current Registered Agent:

ANDROUIN, DOMINIQUE 7928 WEST DRIVE 309 NORTH BAY VILLAGE, FL 33141 US

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000129368

Entity Name: IND CAPITAL PARTNERS LLC

## **Current Principal Place of Business:**

7928 WEST DRIVE 309 NORTH BAY VILLAGE, FL 33141

## **Current Mailing Address:**

7928 WEST DRIVE 309 NORTH BAY VILLAGE, FL 33141

### **FEI Number: APPLIED FOR**

02/10/2017

## SIGNATURE: DOMINIQUE ANDROUIN

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Feb 10, 2017 Secretary of State CC3197342811

Certificate of Status Desired: No

Date