

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000001207

Entity Name: INTERSTATE RESTORATION, LLC

Current Principal Place of Business:

6200 SOUTH SYRACUSE WAY, SUITE 230
GREENWOOD VILLAGE, CO 80111

Current Mailing Address:

6200 SOUTH SYRACUSE WAY, SUITE 230
GREENWOOD VILLAGE, CO 80111 US

FEI Number: 20-8487188

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER, SECRETARY, CHIEF
 LEGAL OFFICER
Name KRISTOFKO, MATTHEW
Address 6200 SOUTH SYRACUSE WAY, SUITE
 230
City-State-Zip: GREENWOOD VILLAGE CO 80111

Title MANAGER, CHIEF ADMINISTRATIVE
 OFFICER
Name GARVER, TONY
Address 6200 SOUTH SYRACUSE WAY, SUITE
 230
City-State-Zip: GREENWOOD VILLAGE CO 80111

Title MANAGER, CFO
Name FADEYI, ABI
Address 6200 S SYRACUSE WAY, SUITE 230
City-State-Zip: GREENWOOD VILLAGE CO 80111

Title CHAIRMAN
Name JOHNSON, JEFFREY
Address 6200 SOUTH SYRACUSE WAY, SUITE
 230
City-State-Zip: GREENWOOD VILLAGE CO 80111

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: MATTHEW KRISTOFKO

MANAGER

04/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date