L16000221952

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(Address)							
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D. BRUCE 'AUG 19 2020

COVER LETTER

	egistration Section vivision of Corporations					
	IST CLASS U.S. LLC					
SUBJEC		ame of Limited	Liability Company			
Dear Sir c	or Madam:					
The enclo	sed Registered Agent/Registered O	ffice Change an	d fee(s) are submitted for filing.			
Please ret	urn all correspondence concerning t	his matter to the	e following:			
KENNETI	TROSEN					
	Name of Person	·				
	Firm/Company					
1410 - 201	TH STREET, SUITE 202			SE(2020 JUL -6 AH 7: 07	
	Address			ALL	JUL	
МІАМІВ	EACH FL 33139			ALA MARK	2	
City/State and Zip Code			SSER	A	;	
KENROSI	EN75@GMAIL.COM				7:0	
E-m	ail address: (to be used for future ar	mual report not	ification)	, tu	, -1	
For furthe	r information concerning this matte	r, please call:				
KENNETI	H ROSEN	305 at (321-5192			
	Name of Person	\ <u>-</u>	Area Code & Daytime Telephone Nu	ımber		
R D P	Iailing Address: egistration Section fivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303)		
E	nclosed is a check for the followin	g amount:				
	■ \$25 Filing Fee					

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

L. N	ame of the limited liability company: IST CLASS U.S	S. LLC				
2. (a)	1410 - 20TH STREET	(b)	(b) 1410 - 20TH STREET			
2. (11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing a	ddress of limited liability company: MAY BE POST OFFICE BOX)		
	SUITE 202		SUITE 202			
	MIAMI BEACH, FL 33139		MIAMI BEACH, FL 33139			
	12/07/2016]	.16000221952			
3.	Date of filing/registration in Florida	4.	Docum	ent number		
5. (a)	JLE REGISTERED AGENT CORPORATION					
<i>5.</i> (a)	Registered Agent and Registered Office shown on the records o 1130 WASHINGTON AVENUE	f the Florida	Dept. of State:			
	Registered Office Address	(ADDRESS)		2		
(b)	MIAMI BEACH , F	L_33139		2020 JUL SECRETALLA		
	KENNETH ROSEN			LAHN JL-6		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			λ´ - (ΥΥΥ)		
	1410 - 20TH STREET			SSEE PATE		
	NEW Registered Office Address:			一部コ		
	SUITE 202					
	MIAMI BEACH, F	L				
change agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members liters of organization or the operating agreement of the	e registered iability cor of the limi e limited lia	I office and the bus apany, it is hereby ted liability compa	siness office of the registered confirmed that the change(s)		
Signa	nture of a member or authorized representative of a member		Printed o	or typed name of signee		
попус	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address. I d'in writing of this change.	ree to act i performa ed for in Ci hereby con	n this capacity. 1 j nce of my duties, 6 napter 605, F.S. C girm that the limit	further agree to comply with the nd I am familiar with and accept Or, if this document is being filed ed liability company has been		
Signati	are of Registered Agent					