118000 203408

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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900327835419 04/12/19--01027--015 **25.00



1. July 1. July 1.

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ		e of Limite	d Liability Company	
			a submity company	
Dear S	Sir or Madam:			
The en	nclosed Registered Agent/Registered Offi	ce Change	and fee(s) are submitted for filing.	
Please	e return all correspondence concerning the	is matter to	the following:	
YATI	IT THAKKER			
	Name of Person		······	~
IDEA	AL MARKET LLC			
	Firm/Company			
528,	NW 8TH AVE			
	Address			32 (
GAIN	NESVILLE-FL-32601			
	City/State and Zip Code			
IDEA	LMARKET1991@GMAIL.COM			
	E-mail address: (to be used for future ann	ual report n	otification)	
For fu	orther information concerning this matter,	please call:		
YATI	T THAKKER	352 at (275-4922	
	Name of Person		Area Code & Daytime Telepho	ne Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
	Enclosed is a check for the following	amount:		
	2 \$25 Filing Fee		\$55 Filing Fee & Certified Copy	

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.

1. Name of the limited liability company:	AL MARKET LLC
2. (a) IDEAL MARKET LLC	(b) IDEAL MARKET LLC
Principal office address of limited liability (Note: MUST BE STREET ADDR.	company: Mailing address of limited liability company:
528, NW 8TH AVE.	528, NW 8TH AVE.
GAINESVILLE -FL-32601	GAINESVILLE-FL-32601
08-24-2018	L-18000203408
3. Date of filing/registration in Flor	ida 4. Document number
5. (a) YATIT THAKKER	
Registered Agent and Registered Office shown on	he records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORI	DA STREET ADDRESS) PA STREET ADDRESS) PA PR
340, W.NOBLE AVE	PP PR
WILLISTON	7 PANON 200 PANO
Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Office Address:	
528, NW 8TH AVE	
GAINESVILLE	, FL 32601
the change or changes are made, the Florida street agent will be identical. Or, in the case of a Florida was/were authorized by an affirmative vote of the the articles of organization or the operating agreed was affirmative of a member or authorized representative of a member or authorized representative of a member or authorized representative of a member of a member or authorized representative of a member of a member or authorized representative of a member of a member or authorized representative of a member of a member or authorized representative of a member of a member or authorized representative of a member of a member of a member or authorized representative of a member	YATIT THAKKER.

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00