Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corpo Fax Number :				3 A 2
Account Number : Phone : Fax Number :  **Enter the email address f annual report mailing	(323)962-8600 (323)962-3889 or this business enti	ty to be used for 1 address please	future	Ξ
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Electronic Filing Menu

Corporate Filing Menu

D'SCOTT

JUN - 4 2019

	COVERTERIER
TO: Registration Section Division of Corporations	
SUBJECT: INNER SUPREME LLC	
Name Name	e of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Cheyenne Moseley	1 1 
Name of Person	. >
Legalzoom.com, Inc.	
Firm/Company	
101 N. Brand Blvd., 10th Floor	
Address	
Glendale, CA 91203	·
City/State and Zip Code	
aleks.tgreat1@gmail.com	
E-mail address: (to be used for future ann	nual report notification)
For further information concerning this matter.	please call:
Cheyenne Moseley	800 773-0888 ext 9724
Name of Person	Area Code & Daytime Telephone 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	g amount:
□ \$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.

I. Nai	ne of the limited liability company:	ER SUPRE			-34"			
2. (a) <sub>.</sub>	502 S Fremont Ave., Apartment #3	16	(b) <u>5</u>		remont Ave., Apartment #316			
	Principal office address of limited liability of (Note: MUST BE STREET ADDRE				ailing address of limited (Nate: MAY BE POST			
	Tampa, FL 33606		<u> </u>	ampa, F	∟ 33606	<del> </del>		
	01/17/2019		 <u>L1</u>	900001	9493			
3.	Date of filing/registration in Flori	da	4.	[	Document number			
5. (a)	Aleksandar Nikoloski				• •	=		
J. (a)	Registered Agent and Registered Office shown on t	he records of the	Florida De	pt. of State:		- <del>-</del> -		
	502 S Fremont Ave., Apartment #	316				د		
	Registered Office Address	DA STREET AD	DRESS)			D	<b>う</b>	
			2000	<del></del>	ŗ	2:		
	Tampa	, fl	3606		•			
(b)	UNITED STATES CORPORATION	I AGENTS,	INC.					
(0)	Enter name of NEW Registered Agent and/or NE	W Registered O	Mice addre	15:				
	13302 WINDING OAK COURT, S	UITE A						
	NEW Registered Office Address:							
	ТАМРА	, FL_	33612					
the cha	imited liability company is not organized unge or changes are made, the Florida streewill be identical. Or, in the case of a Florida ere authorized by an affirmative vote of the icles of organization or the operating agree	t address of the limited liab	ne registe pility com the limite imited lial	pany, it is d liability oility com	hereby confirmed company or as oth pany.	that the cl	nange(s)	
			Aleks	andar N	likoloski	-6		
•	ture of a member of althoristic representative of a n by accept the appointment as registered as ions of all statutes relative to the proper al ligations of my position as registered agen ely reflect a change in the registered office		e to act in performan for in Ch	this cape ce of my e apter 605	Printed or typed name acity. I further agree thites, and I am far fished to the limited liability.	e la cami	oly with the and accept being filed has been	

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