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(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							





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2020 SEP 10 PH 3: 31

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COVER LETTER

	istration Section sion of Corporations							
SUBJECT:	InnerDat LLC							
	Name of Limited Liability Company							
Dear Sir or M	Madam:							
The enclosed	d Registered Agent/Registered Office (Change and fee(s) are submitted for filing.						
Please return	n all correspondence concerning this m	atter to the following:						
Victor Marik								
-	Name of Person							
	Firm/Company							
722 NE 9th A	Ave							
•	Address							
Gainesville, I	FI. 32601							
-	City/State and Zip Code							
textporter@g	mail.com							
E-mail	address: (to be used for future annual	report notification)						
For further i	nformation concerning this matter, plea	ase call:						
Victor Marik		352 213-2458 at ()						
	Name of Person	Area Code & Daytime Telephone Number						
Reg Div P.O	iling Address: distration Section dision of Corporations dispersion Box 6327 delahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
Enc	losed is a check for the following am-	ount:						
■ \$	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.	Na	me of the limited liability company: InnerDat LLC										
2. (a	a)	Victor Marik			(b)							
(-	-,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)						
		722 NE 9th Ave			722 NE 9t	th Ave						
		Gainesville, FL 32601	_		Gainesvill	nesville. FL 32601						
		September 25, 2019		I	.19000241	846						
3.		Date of filing/registration in Florida	4.	_		Document number						
5 (a)	REGISTERED AGENTS INC.										
5. (a)	aj	Registered Agent and Registered Office shown on the records of	the Flor	ida l	Dept. of Stat	e:						
		7901 4TH ST N										
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				_	:	202				
		STE 300			3S (1	(=p7						
(b		ST. PETERSBURG . F1	33702			-	TARA LAHA	2020 SEP 10	Junear Ju			
	າ)	Victor Marik	_	SSEE COLP	PH							
()		Enter name of NEW Registered Agent and/or NEW Registered Office address:				— .	FIA	ယ ယ				
		722 NE 9th ave					' []	<u>~</u>				
		NEW Registered Office Address:	*			_						
						_						
		Gainesville FL	32601			_						
chan ageń was the a	ge tve gi	or changes are made, the Florida street address of the fill be identical. Or, in the rase of a Florida limited liar reauthorized by an affirmative vote of the members of the organization or the operating agreement of the proof a member or authorized representative of a member	registe ability of the l limited	ered com imit d lia	office an pany, it is ed liabilit	d the business office s hereby confirmed to y company or as oth	of the re hat the cl erwise pr	oistera	d			
the prov the c to m notin	relisi	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete gotfons of my position as religiteful agent as provided by reflect a change in the register doffice address. If the writing of this change.	ee to a perfor d for in hereby	ict ii mar 1 Ch con	n this cap ace of my apter 603 firm that	acity. I further agre duties, and I am fam 8, F.S. Or, if this doc the limited liability o	e to comp iliar with cument is company	oly with and a being has be	h the ccept filed en			
Sagn	glyf	e of Registered Agent										