M19000000.6969

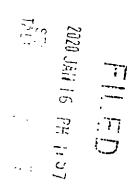
(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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December 18, 2019

IN-NET SOLUTIONS, LLC 4302 HOLLYWOOD BLVD SUITE 187 HOLLYWOOD, FL 33021

SUBJECT: IN-NET SOLUTIONS, LLC

Ref. Number: M19000006969

We have received your document for IN-NET SOLUTIONS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker Regulatory Specialist III

Letter Number: 019A00025685

COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJE	In-Net Solutions, LLC							
	Name of Limited Liability Company							
Dear Si	ir or Madam:							
The end	closed Registered Agent/Registered Office	Change and fee(s)	are submitted for filing.					
Please	return all correspondence concerning this m	atter to the follow	ing:					
Theop	olis Stewart							
	Name of Person							
In-Net	t Solutions							
-	Firm/Company							
4302	Hollywood Blvd Suite 187							
	Address							
Hollyv	vood, Florida 33021							
	City/State and Zip Code							
admin	@innetsolutions.net							
E-	-mail address: (to be used for future annual	report notification)					
For furt	ther information concerning this matter, ple	ise call:						
Theop	olis Stewart	703 95	535332					
	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	Registrati Division o P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 32314					
	Enclosed is a check for the following amount:							
	2 \$25 Filing Fee	🗆 \$55 Filin	g Fee & Certified Copy					

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	ime of the limited liability company: In-Net Solutio	ns, LL	.C			
2.	(a)	4302 Hollywood Ave Suite 187	(b) 4302 Hollywood Ave Suite 187				
	\ -/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of limit (Note: MAY BE PO		-
		4302 Hollywood Ave Suite 187		4302 Ho	ollywood Ave Su	iite 187	<u>_</u>
		Hollywood, Florida 33021	_	Hollywor	od, Florida 3302	21	
		7/8/2019		M190000	06969		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	Theoplis Stewart					
	\- <i>)</i>	Registered Agent and Registered Office shown on the records of the Theoplis Stewart	he Florid	a Dept. of State	- e:		
		Registered Office Address (MUST BE FLORIDA STREET A	DDRES.	<u></u>	-		
		3501 JACKSON STREET SUITE 211			_		
		Hollywood , , FL	33021		· -		
	(b)	Registered Agents Inc					
	` ,	Enter name of NEW Registered Agent and/or NEW Registered	Office ac	ldress:	•	-1	
		Registered Agents Inc			_	2020 JAN 16 T ⁵	-
		NEW Registered Office Address:			•	72.	*****
		7901 4th St N STE 300			_	5	
		St. Petersburg , FL	33702			T D	ED
the age wa the	cha ent v s/we arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	s of the the regi bility co	State of Flo stered office ompany, it is nited liability	e and the business of s hereby confirmed y company or as oth	office of the re that the chang	gistered ge(s)
		ure of a member or authorized representative of a member	Th	eoplis Stev			
					Printed or typed name	_	
pro the to no	ovisi obli mere tified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete to gations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	ee to ac perform for in e ereby c	t in this capa ance of my a Chapter 605, onfirm that t	icity. I further agri luties, and I am fan , F.S. Or, if this do the limited liability	ee to comply v niliar with and ocument is bei company has	vith the d accept ng filed been
_=		re of Registered Agent					