P06000108325

(Requestor's Name)			
(Address)			
(Address)			
(Hadioso)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
(2004)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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06 OCT 18 AM 8: 29 SECRETARY OF STATE TAIL AMASSEE, FLORIDA

COVER LETTER

Divisi	ion of Corporations	·	
SUBJECT:_	Indo Market, Inc. (Name of Co	orporation)	
DOCUMENT	г NUMBER: P06000108325		
	Statement of Change of Registered Office	e/Agent and fee are submitted for filing.	
Please return	all correspondence concerning this matter	to the following:	
	Lie Far	a Nico	
	(Name of Con		
	`	,	
	Indo Mar	ket Inc	
Indo Market, Inc. (Firm/Company)			
	948 South Flor	rida Avenue	
	(Address)		
	Lakeland,	FL 33803	
	(City/State ar		
For further in	formation concerning this matter, please of	eall:	
	_		
Lie Fan Njo	(Name of Contact Person)	at (<u>863</u>) 602-9464 (Area Code & Daytime Telephone Number)	
	(Name of Condet Folson)	(The code of Day time 1916phone 1915)	
Enclosed is a \$35.00 check made payable to the Department of State.			
	Mailing Address: Amendment Section	Street Address:	
		Amendment Section	
	Division of Corporations	Division of Corporations	
	P.O. Box 6327	Clifton Building	
	Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of Florida or registered agent, or both, in the State of Florida.
	the corporation: Indo Market, I	
2. The principal	office address: 948 South Flor	ida Avenue
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 08/21/20	006 Document number: P06000108325
	d street address of the current reg rtment of State:	istered agent and registered office on file with the
	Harianto Suryo	
	2101 Glen Heights Pla	ace
	Lakeland, FL 33813	7,00
6. The name and (if changed):	I street address of the new registe	ered agent (if changed) and /or registered office
	Lie Fan Njoo	SSEE SSEE
	3618 Amber Lane	
	(P.O. Box NOT	acceptable) 8.
	Lakeland, FL 33813	
The street addre	ess of its registered office and the be identical.	e street address of the business office of its registered agent,
Such change wa authorized by th	as authorized by resolution duly he board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.
		LIE FAN Njoo / Vice president
	ure of an officer or director)	(Printed or typed name and title)
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered of to comply with the provisions of d I am familiar with and accept ng filed merely to reflect a char been notified in writing of this	ngent and agree to act in this capacity. I all statutes relative to the proper and complete performance I the obligation of my position as registered agent. Or, if this the in the registered office address, I hereby confirm that the change.
		10/12/06
(Sig	gnature of Registered Agent)	(Date)
If signing on be	half of an entity:	
	E FAN Njoo	_
(1	yped or Printed Name)	

* * * FILING FEE: \$35.00 * * *