

P18000027985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

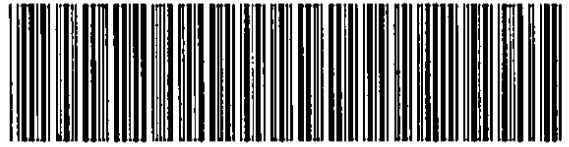
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2019 MAY -6 AM 11:35

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C GOLDEN

MAY - 7 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **INTERPRIME INC**
Name of Corporation

DOCUMENT NUMBER: **P18000027985**

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

ALEXANDR BALAN

Name of Contact Person

INTERPRIME INC

Firm/Company

1150 AIRPORT RD UNIT 104

Address

DESTIN FL 32541

City/State and Zip Code

interprimelogistics@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALEXANDR BALAN

Name of Contact Person

850 714-7221

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 18, 2019

ALEXANDR BALAN
1150 AIRPORT ROAD
UNIT 104
DESTIN, FL 32541

SUBJECT: INTERPRIME INC.
Ref. Number: P18000027985

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 419A00007902

RECEIVED
2019 MAY -6 PM 12:14
SECRETARY OF STATE, FL
DATE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2019

ALEXANDR BALAN
1150 AIRPORT ROAD
UNIT 104
DESTIN, FL 32541

SUBJECT: INTERPRIME INC.
Ref. Number: P18000027985

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 019A00006925

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: INTERPRIME INC
2. The principal office address: 1150 AIRPORT RD UNIT 104
DESTIN FL 32541
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 03.22.2018/ Document number: P18000027985

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Alexandr Balan
1150 airport rd unit 104
Destin Fl 32541

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Alexandr Balan
8800 Pine Forest Rd , apt 9202
P.O. Box NOT acceptable
Pensacola Fl 32534

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

Alexandr Balan -President

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

04.15.19

Date

If signing on behalf of an entity:

Typed or Printed Name

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