I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and
that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CAROL RUBEN

Electronic Signature of Signing Authorized Person(s) Detail

AUTHORIZED AGENT FOR 02/25/2021

SIGNATURE: JAMES S CAMPBELL 02/25/2021 Date Electronic Signature of Registered Agent

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Authorized Person(s) Detail :				
Title	AMBR	Title	MGM	
Name	MACQUEEN, JULIAN B	Name	INNISFREE HOTELS	
Address	113 BAYBRIDGE PARK	Address	113 BAYBRIDGE PARK	
City-State-Zip:	GULF BREEZE FL 32561	City-State-Zip:	GULF BREEZE FL 32561	
Title	CFO, AUTHORIZED REPRESENTATIVE			
Name	MOORE , S. BROOKS			
Address	113 BAY BRIDGE DR			
City-State-Zip:	GULF BREEZE FL 32561			

## Name and Address of Current Registered Agent:

CAMPBELL, JAMES S BYRD CAMPBELL P.A. 180 PARK AVENUE NORTH SUITE 2A WINTER PARK, FL 32789 US

## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L04000049378

### Entity Name: INTERCHANGE SUPPLY INTERNATIONAL L.L.C.

### **Current Principal Place of Business:**

**113 BAYBRIDGE PARK** GULF BREEZE, FL 32561

## **Current Mailing Address:**

**113 BAYBRIDGE PARK** GULF BREEZE, FL 32561

#### FEI Number: 20-1292733

# Certificate of Status Desired: No

FILED Feb 25, 2021 Secretary of State 9850087884CC

Date