# that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MOHAMAD ALKAMEH

Electronic Signature of Signing Authorized Person(s) Detail

# Entity Name: INTERCONTINENTAL INVESTMENTS GROUP LLC **Current Principal Place of Business:**

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

8996 ANGELICA DR ORLANDO, FL 32836

## **Current Mailing Address:**

DOCUMENT# L12000131453

8996 ANGELICA DR ORLANDO, FL 32836 US

### FEI Number: 46-1192253

#### Name and Address of Current Registered Agent:

KEMEH, MOHAMAD 6119 TARAWOOD DR ORLANDO, FL 32819 US

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.

#### SIGNATURE: MOHAMAD KEMEH

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title	MGRM
Name	ALKAMEH, MOHAMAD
Address	8996 ANGELICA DR
City-State-Zip:	ORLANDO FL 32836

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

MANAGER

03/19/2015

Date

## FILED Mar 19, 2015 Secretary of State CC5495842933

Certificate of Status Desired: No

03/19/2015 Date