

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000058701

**Entity Name:** INOLA ENTERPRISES, LLC

**Current Principal Place of Business:**

1250 W. UNIVERSITY AVENUE, UNIT 2  
GAINESVILLE, FL 32601

**Current Mailing Address:**

P. O. BOX 13431  
GAINESVILLE, FL 32604 US

**FEI Number:** 46-2678553

**Certificate of Status Desired:** No

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

BAJROVIC, AIDA  
1250 W. UNIVERSITY AVENUE, UNIT2  
GAINESVILLE, FL 32601 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGR  
Name BAJROVIC, AIDA  
Address 1250 W. UNIVERSITY AVENUE, UNIT 2  
  
City-State-Zip: GAINESVILLE FL 32601

*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:** AIDA BAJROVIC

MANAGING PARTNER

02/11/2015

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date