

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000261467

Entity Name: INCHRISTED LLC

Current Principal Place of Business:

250 PARKWOOD CIRCLE
NICEVILLE, FL 32578

Current Mailing Address:

250 PARKWOOD CIRCLE
NICEVILLE, FL 32578

FEI Number: 36-4886501

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALI, CECELIA E
250 PARKWOOD CIRCLE
NICEVILLE, FL 32578 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 ALI, CECELIA E
Address 250 PARKWOOD CIRCLE
City-State-Zip: NICEVILLE FL 32578

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: CECELIA ALI

MGR

04/30/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date