

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000001450

Entity Name: REVENUE MANAGEMENT SOLUTIONS, LLC**Current Principal Place of Business:**777 S HARBOUR ISLAND BLVD
890
TAMPA, FL 33602**Current Mailing Address:**777 S HARBOUR ISLAND BLVD
890
TAMPA, FL 33602 US**FEI Number:** 20-2408441**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 N. HIGHLAND AVENUE
TAMPA, FL 33602 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 MANAGER
Name WOHLHUETER, ALEX
Address 777 S HARBOUR ISLAND BLVD
890
City-State-Zip: TAMPA FL 33602

Title PRESIDENT
Name ROUGIE, OLIVIER
Address 777 S HARBOUR ISLAND BLVD
890
City-State-Zip: TAMPA FL 33602

Title MANAGER
Name FERNANDEZ, SEBASTIAN
Address 777 S HARBOUR ISLAND BLVD
890
City-State-Zip: TAMPA FL 33602

Title MANAGER
Name OAKES, JOHN
Address 777 S HARBOUR ISLAND BLVD
890
City-State-Zip: TAMPA FL 33602

Title MANAGER
Name KUPERMAN, MARK
Address 777 S HARBOUR ISLAND BLVD
890
City-State-Zip: TAMPA FL 33602

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: OLIVIER ROUGIE

PRESIDENT

01/12/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date