

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000007442

**Entity Name:** VACATION MANAGEMENT, LLC

**Current Principal Place of Business:**

4471 NW 36TH ST  
SUITE 208  
MIAMI SPRINGS, FL 33166

**Current Mailing Address:**

4471 NW 36TH ST  
SUITE 208  
MIAMI SPRINGS, FL 33166 US

**FEI Number:** 26-1806685

**Certificate of Status Desired:** No

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

FURMANSKI, ARIEL  
669 NE 191 TERR  
MIAMI, FL 33179 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	MGRM	Title	MGRM
Name	CANTOR, FABIANA M	Name	FURMANSKI, ARIEL E
Address	669 NE 191 TER	Address	669 NE 191 TER
City-State-Zip:	MIAMI FL 33179	City-State-Zip:	MIAMI FL 33179

*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:** ARIEL FURMANSKI

MGRM

02/06/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date