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. 02/16/2018

DIRECTOR OF **OPERATIONS**

SIGNATURE: STEPHEN GARRETT

Electronic Signature of Signing Authorized Person(s) Detail

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000109842

Entity Name: TRAVEL ESOLUTIONS, LLC

Current Principal Place of Business:

1371 SAMANTHA CIRCLE E JACKSONVILLE, FL 32218

Current Mailing Address:

1371 SAMANTHA CIRCLE E JACKSONVILLE. FL 32218

FEI Number: 47-1423756

Name and Address of Current Registered Agent:

GARRETT, STEPHEN R 1371 SAMANTHA CIRCLE E JACKSONVILLE, FL 32218 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

Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	GARRETT, STEPHEN	Name	SOCANDER, CLAUDIU
Address	1371 SAMANTHA CIRCLE E	Address	4870 DEER LAKE DRIVE E
City-State-Zip:	JACKSONVILLE FL 32218	City-State-Zip:	JACKSONVILLE FL 32246
T '41-			
Title	AMBR		
Name	DOSTER, RON		
Address	9388 TRAMORE GLEN CT		

Certificate of Status Desired: No

FILED Feb 16, 2018 Secretary of State CC9008433747

Date

Date