FEI Number: 47-1423756			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
NICHOLS, ESTHER CPA 1635 EAGLE HARBOR PKWY STE 4 FLEMING ISLAND, FL 32003 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: ESTHER NICHOLS CPA				01/22/2022
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AMBR	Title	AMBR	
Name	SOCANDER, CLAUDIU	Name	DOSTER, RON	
Address	8540 HOMEPLACE DR APT 4201	Address	9388 TRAMORE GLEN CT	
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256	

# **Current Mailing Address:**

DOCUMENT# L14000109842

9388 TRAMORE GLEN COURT JACKSONVILLE, FL 32256

Entity Name: TRAVEL ESOLUTIONS, LLC

**Current Principal Place of Business:** 

9388 TRAMORE GLEN COURT JACKSONVILLE, FL 32256 US

### FEI Number: 47-1423756

#### N

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: CLAUDIU SOCANDER

Electronic Signature of Signing Authorized Person(s) Detail

AMBR

01/22/2022

## FILED Jan 22, 2022 Secretary of State 2253548129CC

## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Date