#### 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. 01/06/2016

MGR

#### SIGNATURE: ODALYS PARRA

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L15000181513

Entity Name: AATS PARRA TRAVEL, LLC

#### **Current Principal Place of Business:**

1275 WEST 47TH PLACE SUITE 105 HIALEAH, FL 33012

# **Current Mailing Address:**

1275 WEST 47TH PLACE SUITE 105 HIALEAH, FL 33012

## FEI Number: 47-5426204

## Name and Address of Current Registered Agent:

PARRA, MARIO J 1275 WEST 47TH PLACE SUITE 105 HIALEAH, FL 33012 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	MGR	Title	MGR
Name	PARRA, MARIO J	Name	PARRA, ODALYS
Address	1275 WEST 47TH PLACE SUITE 105	Address	1275 WEST 47TH PLACE SUITE 105
City-State-Zip:	HIALEAH FL 33012	City-State-Zip:	HIALEAH FL 33012

# FILED Jan 06, 2016 Secretary of State CC6170828261

Certificate of Status Desired: No

Date

Date