

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000025265

**Entity Name:** COLLEGE OVERNIGHT LLC

**Current Principal Place of Business:**

981 HWY 98 E  
SUITE 3143  
DESTIN, FL 32541

**Current Mailing Address:**

981 HWY 98 E  
SUITE 3143  
DESTIN, FL 32541 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MARKEN, JEFF  
981 HWY 98 E  
SUITE 3143  
DESTIN, FL 32541 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            AMBR  
Name            MARKEN, JEFF  
Address        981 HWY 98 E, SUITE 3143  
City-State-Zip: DESTIN FL 32541

*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:** JEFF MARKEN

**MEMBER**

**02/28/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date