

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000220339

Entity Name: LIVERIGHT VACATIONS LLC

Current Principal Place of Business:

495 PINE AVENUE
NAPLES, FL 34108

Current Mailing Address:

495 PINE AVENUE
NAPLES, FL 34108

FEI Number: 82-3266868

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RISLEY, DONNA
495 PINE AVENUE
NAPLES, FL 34108 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	Title	AMBR
Name	RISLEY, DONNA	Name	RISLEY, NORMAN
Address	495 PINE AVENUE	Address	495 PINE AVENUE
City-State-Zip:	NAPLES FL 34108	City-State-Zip:	NAPLES FL 34108

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: DONNA RISLEY

MEMBER

04/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date