#### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000022828

Entity Name: CAROL VACATION HOMES LLC

**Current Principal Place of Business:** 

7751 KINGSPOINTE PARKWAY SUITE 119 ORLANDO, FL 32819

## **Current Mailing Address:**

7751 KINGSPOINTE PARKWAY SUITE 119 ORLANDO, FL 32819

## FEI Number: 30-1030400

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

TAX SOLUTIONS & BOOKKEEPING LLC 7751 KINGSPOINTE PARKWAY SUITE 119 ORLANDO, FL 32819 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 :

Authorized Terson(s) Detail .			
Title	AMBR	Title	AMBR
Name	JARDIM, ELIEDSON	Name	PANARO DIAS JARDIM, FERNANDA
Address	1570 SANDBAGGER DRIVE	Address	1570 SANDBAGGER DRIVE
City-State-Zip:	DAVENPORT FL 33896	City-State-Zip:	DAVENPORT FL 33896
		<b>T</b> :0 -	
Title	AMBR	Title	AMBR
Title Name	AMBR PANARO JARDIM, LUIZA M	Title Name	AMBR PANARO JARDIM, CAROLINA M
Name	PANARO JARDIM, LUIZA M	Name	PANARO JARDIM, CAROLINA M 1570 SANDBAGGER DRIVE

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.

AMBR

## SIGNATURE: ELIEDSON JARDIM

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Apr 17, 2019 Secretary of State 6809556404CC

Certificate of Status Desired: No

Date