

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000151216

**Entity Name:** SOFLO VACATIONS LLC

**Current Principal Place of Business:**

123 NW 13TH ST  
SUITE 305B  
BOCA RATON, FL 33432

**Current Mailing Address:**

123 NW 13TH ST  
SUITE 305B  
BOCA RATON, FL 33432 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MESSINGER, SAMUEL  
123 NW 13TH ST  
305B  
BOCA RATON, FL 33432 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            MESSINGER, SAMUEL  
Address        123 NW 13TH ST SUITE 305B  
City-State-Zip: BOCA RATON FL 33432

Title            AMBR  
Name            CEASER, MICHAEL  
Address        123 NW 13TH ST SUITE 305B  
City-State-Zip: BOCA RATON FL 33432

*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:** SAMUEL MESSINGER

AMBR

01/09/2020

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

\_\_\_\_\_  
Date