

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000283516

**Entity Name:** REVOLVE TRANS LLC

**Current Principal Place of Business:**

900 CROSSINGS DR  
APT 632  
PANAMA CITY BEACH, FL 32413

**Current Mailing Address:**

900 CROSSINGS DR  
APT 632  
PANAMA CITY BEACH, FL 32413 US

**FEI Number:** 84-3859762

**Certificate of Status Desired:** No

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

BRILEV, ANTON  
900 CROSSINGS DR  
APT 632  
PANAMA CITY BEACH, FL 32413 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	MGR	Title	AMBR
Name	BRILEV, ANTON	Name	KHAKIMOV, RENAT
Address	90 CROSSINGS DR APT 632	Address	1610 FORTUNE AVE
City-State-Zip:	PANAMA CITY BEACH FL 32413	City-State-Zip:	PANAMA CITY FL 32405

*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:** ANTON BRILEV

**MGR**

**04/25/2022**

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

\_\_\_\_\_  
Date