

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000011784

Entity Name: NOMAD RENTALS & RETREATS LLC

Current Principal Place of Business:

43 GARLAND CIRCLE
CRAWFORDVILLE, FL 32327

Current Mailing Address:

43 GARLAND CIRCLE
CRAWFORDVILLE, FL 32327 US

FEI Number: 86-2829133

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEL DEBBIO, MEGAN R
43 GARLAND CIRCLE
CRAWFORDVILLE, FL 32327 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
Name DEL DEBBIO, MEGAN R
Address 43 GARLAND CIRCLE
City-State-Zip: CRAWFORDVILLE FL 32327

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: MEGAN DEL DEBBIO

01/23/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date