

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000482906

**Entity Name:** TRAVEL MKT LLC

**Current Principal Place of Business:**

169 NW 104 ST  
MIAMI SHORES, FL 33150

**Current Mailing Address:**

PO BOX 530885  
MIAMI SHORES, FL 33153 US

**FEI Number:** 98-1636166

**Certificate of Status Desired:** No

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

CAVILA TAX & ACCOUNTING GROUP LLC  
169 NW 104 ST  
MIAMI SHORES, FL 33150 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 BARNFATHER, JENNIFER  
Address PO BOX 530885  
City-State-Zip: MIAMI SHORES FL 33150

Title AMBR  
Name MOURINO, LUCIANO  
Address PO BOX 530885  
City-State-Zip: MIAMI SHORES FL 33150

*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:** JENNIFER BARNFATHER

AMBR

01/06/2022

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

\_\_\_\_\_ Date