

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000018849

**Entity Name:** ABSOLUTETRIP LLC

**Current Principal Place of Business:**

608 W ARIEL RD  
EDGEWATER, FL 32141

**Current Mailing Address:**

608 W ARIEL RD  
EDGEWATER, FL 32141

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

NEFF, RONALD L  
608 W ARIEL RD  
EDGEWATER, FL 32141 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 NEFF, RONALD L  
Address 608 W ARIEL RD  
City-State-Zip: EDGEWATER FL 32141

*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:** RONALD L NEFF

MGR

02/03/2024

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

\_\_\_\_\_  
Date