## 2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M18000002600

**Entity Name: COMMUTEAIR LLC** 

**Current Principal Place of Business:** 

24950 COUNTRY CLUB BLVD.,

SUITE 200

NORTH OLMSTED, OH 44070

**Current Mailing Address:** 

24950 COUNTRY CLUB BLVD., SUITE 200

NORTH OLMSTED, OH 44070 US

FEI Number: 47-5676237 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

**FILED** Feb 26, 2024

**Secretary of State** 

4544705851CC

Authorized Person(s) Detail:

Title **MANAGER** 

PRICE, ANDREW

Name

Address 376 GOLF COURSE ROAD,

City-State-Zip: SOUTH BURLINGTON VT 05403

Title **MANAGER** 

Name THOMSEN, ANNA

Address 233 SOUTH WACKER DRIVE,

City-State-Zip: CHICAGO IL 60606

Title MANAGER

Name SULLIVAN, JOHN

Address 529 SOUTH FLAGLER DRIVE #20GH

City-State-Zip: WEST PALM BEACH FL 33401

CHICAGO IL 60606 City-State-Zip:

Title

Title

Name

Address

Name ELBE, ANTONY VON

Address 101 S FORT LAUDERDALE BEACH

ANGEL, MAURICIO

233 SOUTH WACKER DRIVE

BLVD,

**MANAGER** 

MANAGER

APARTMENT2603

City-State-Zip: FORT LAUDERDALE FL 33316

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: SEAN FRICK

CHIEF FINANCIAL **OFFICER** 

02/26/2024