

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000005535

**Entity Name:** TRAVELKEY LLC

**Current Principal Place of Business:**

1001 E ATLANTIC AVE  
SUITE 202  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

1000 MARKET STREEET  
STE 300  
PORTSMOUTH, NH 03801 US

**FEI Number:** 02-0580081

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	MGR
Name	ADE, RICHARD	Name	WALSH, MICHAEL
Address	1000 MARKET STREET	Address	1001 E. ATLANTIC AVE. SUITE 202
City-State-Zip:	PORTSMOUTH NH 03801	City-State-Zip:	DELRAY BEACH FL 33483
Title	MGR	Title	MGR
Name	WALSH, MARK	Name	WALSH, WILLIAM
Address	1001 E. ATLANTIC AVE. SUITE 202	Address	1000 MARKET STREET, SUITE 300
City-State-Zip:	DELRAY BEACH FL 33483	City-State-Zip:	PORTSMOUTH NH 03801

*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:** RICHARD ADE

**MANAGER**

**02/14/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date