

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000015043

Entity Name: SKYLINE TOURING ENTERPRISES, LLC

Current Principal Place of Business:

901 A STREET
SUITE C
SAN RAFAEL, CA 94901

Current Mailing Address:

901 A STREET
SUITE C
SAN RAFAEL, CA 94901 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ERESIDENTAGENT, INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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: ERIKA EASTER

03/19/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name BETTS, BROOKS
Address 901 A STREET
 SUITE C
City-State-Zip: SAN RAFAEL CA 94901

Title MANAGER
Name BUNDRICK, CHRISTOPHER
Address 901 A STREET
 SUITE C
City-State-Zip: SAN RAFAEL CA 94901

Title MANAGER
Name SANDERS, DEREK
Address 901 A STREET
 SUITE C
City-State-Zip: SAN RAFAEL CA 94901

Title MANAGER
Name LENZO, JEREMY
Address 901 A STREET
 SUITE C
City-State-Zip: SAN RAFAEL CA 94901

Title MANAGER
Name GARCIA, ALEXANDER
Address 901 A STREET
 SUITE C
City-State-Zip: SAN RAFAEL CA 94901

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: BROOKS BETTS

MANAGER

03/19/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date