

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000075824

Entity Name: GOOD VACATIONS, LLC

Current Principal Place of Business:

8818 CARLYLE AVE
SURFSIDE, FL 33154

Current Mailing Address:

8818 CARLYLE AVE
SURFSIDE, FL 33154 US

FEI Number: 27-1890808

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROCHE, OLIVIER
8818 CARLYLE AVE
SURFSIDE, FL 33154 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 MGRM
Name ROCHE, OLIVIER
Address 833 86TH STREET
City-State-Zip: MIAMI BEACH FL 33141

Title MGR
Name ESPECHE, GAEL
Address 8818 CARLYLE AVE
City-State-Zip: SURFSIDE FL 33154

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: OLIVIER ROCHE

MGR

03/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date