

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000040623

Entity Name: SPLASH VACATION RENTALS, LLC

Current Principal Place of Business:

2727 NE 15 ST
FT LAUDERDALE, FL 33304

Current Mailing Address:

2727 NE 15 ST
FORT LAUDERDALE, FL 33304 US

FEI Number: 45-1621249

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STANDART, JOHN CPA
1000 W MCNAB RD
182
POMPANO BCH, FL 33069 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 JOHNSON, BARBARA
Address PO BOX 39748
City-State-Zip: FT LAUDERDALE FL 33339

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: BARBARA JOHNSON

MGRM

03/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date