

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000066192

**FILED**  
**Feb 05, 2019**  
**Secretary of State**  
**4615086996CC**

**Entity Name:** ORLANDO HOLIDAY MANAGEMENT, LLC

**Current Principal Place of Business:**

C/O LOMNESS CPA SERVICES, PA  
1060 WOODCOCK ROAD  
ORLANDO, FL 32803

**Current Mailing Address:**

1 CHILDWALL PRIORY ROAD  
CHILDWALL  
LIVERPOOL, L16 7PA GB

**FEI Number:** 45-2497670

**Certificate of Status Desired:** No

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

LOMNESS CPA SERVICES, PA  
C/O LOMNESS CPA SERVICES, PA  
1060 WOODCOCK ROAD  
ORLANDO, FL 32803 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:** INFO@LOMNESSCPA.COM

02/05/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MRGM	Title	MANAGER
Name	MELVIN, PAUL	Name	MELVIN, JILL
Address	211 MENLOVE AVENUE	Address	211 MENLOVE AVENUE
City-State-Zip:	LIVERPOOL L18 3EF	City-State-Zip:	LIVERPOOL L18 3EF

*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:** MELVIN, PAUL

MRGM

02/05/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date