# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L13000049497

### Entity Name: ADAPTUR TRAVEL LLC

## **Current Principal Place of Business:**

11533 SW GLENGARRY CT PORT ST LUCIE, FL 34987

### **Current Mailing Address:**

PO BOX 881921 PORT ST LUCIE, FL 34988 US

## FEI Number: 46-4525857

### Name and Address of Current Registered Agent:

LEAL, DEBORA 11533 SW GLENGARRY CT PORT ST LUCIE, FL 34987 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

## Authorized Person(s) Detail :

TitleMGRNameLEAL, DEBORA GAddress11533 SW GLENGARRY CTCity-State-Zip:PORT ST LUCIE FL 34987

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: DEBORA LEAL

MGR

03/25/2024 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 25, 2024 Secretary of State 8251791159CC

Certificate of Status Desired: No

Date