Title	AUTHORIZED MEMBER	Title	MANAGER
Name	ERKERT, NINA	Name	JELICAERKERT, KRISTIAN
Address	69 WEST BAY STREET	Address	69 WEST BAY STREET
City-State-Zip:	ENGLEWOOD FL 34223	City-State-Zip:	ENGLEWOOD FL 34223

Current Mailing Address:

Entity Name: LEMON BAY VACATIONS LLC

Current Principal Place of Business:

69 WEST BAY STREET ENGLEWOOD, FL 34223 US

SIGNATURE: CHRIS MURTHA

Authorized Person(s) Detail :

DOCUMENT# L14000149735

69 WEST BAY STREET ENGLEWOOD. FL 34223

FEI Number: 47-1992572

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

MURTHA, CHRIS 2800 PLACIDA RD 106 ENGLEWOOD, FL 34224 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.

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: NINA ERKERT

AUTHORIZED MEMBER 05/20/2020

Electronic Signature of Signing Authorized Person(s) Detail

05/20/2020 Date

Certificate of Status Desired: Yes

Date