

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000094765

Entity Name: ESCAPE ROOM ADVENTURES LLC

Current Principal Place of Business:

12995 S. CLEVELAND AVE
SUITE 217
FT MYERS, FL 33907

Current Mailing Address:

731 LOGAN BLVD S.
NAPLES, FL 34119 US

FEI Number: 47-4155735

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHLASINGER, ZEV
731 LOGAN BLVD S.
NAPLES, FL 34119 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 MGR
Name SHLASINGER, ZEV
Address 731 LOGAN BLVD S.
City-State-Zip: NAPLES FL 34119

Title MGR
Name YOUNG, JOSH
Address 8 HEATHER GREEN CT.
City-State-Zip: OCOEE FL 34761

Title MGR
Name BUONOCORE, STEPHEN
Address 7964 EMERALD WINDS CIRCLE
City-State-Zip: BOYNTON BEACH FL 33473

Title MGR
Name DILORENZO, FRANK
Address 3903 W. EL PRADO BLVD
City-State-Zip: TAMPA FL 33629

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: FRANK DILORENZO

03/11/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date