

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000164477

**Entity Name:** STUDENTESCAPE LLC

**Current Principal Place of Business:**

153 EAST 87TH STREET  
UNIT 11C  
NEW YORK, NY 10128

**Current Mailing Address:**

153 EAST 87TH STREET  
UNIT 11C  
NEW YORK, NY 10128 US

**FEI Number:** 84-2412025

**Certificate of Status Desired:** No

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

JIMENEZ, ARNOLD  
12627 FRONT BEACH RD  
PANAMA CITY BEACH, FL 32407 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 JIMENEZ, ARNOLD  
Address 153 EAST 87TH STREET, UNIT 11C  
City-State-Zip: NEW YORK NY 10128

Title AMBR  
Name TARPO HOLDINGS USA INC  
Address 12627 FRONT BEACH RD  
City-State-Zip: PANAMA CITY BEACH FL 32407

Title AMBR  
Name LOIACONO, ANTHONY  
Address 208 TIERRA VERDE LANE  
City-State-Zip: PANAMA CITY BEACH FL 32407

*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:** SHANNON POSAVAD

**OWNER**

**01/23/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date