

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000358765

Entity Name: IMMERSIVE TRAVEL LLC

Current Principal Place of Business:

3516 BELLAND CIRCLE
UNIT C
CLERMONT, FL 34711

Current Mailing Address:

3516 BELLAND CIRCLE
UNIT C
CLERMONT, FL 34711

FEI Number: 85-3835671

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPOHN, SHARON
3516 BELLAND CIRCLE
UNIT C
CLERMONT, FL 34711 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 SPOHN, SHARON
Address 3516 BELLAND CIRCLE UNIT C
City-State-Zip: CLERMONT FL 34711

Title MGR
Name SPOHN, MICHAEL
Address 3516 BELLAND CIRCLE UNIT C
City-State-Zip: CLERMONT FL 34711

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: SHARON SPOHN

MGR

01/25/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date