

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000192918

**Entity Name:** LEVIQUE TOURS AND RENTALS LLC

**Current Principal Place of Business:**

15015 MADEIRA WAY  
MADEIRA BEACH, FL 33708

**Current Mailing Address:**

11204 CLAYRIDGE DR  
TAMPA, FL 33635 US

**FEI Number:** 87-1125420

**Certificate of Status Desired:** No

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

BUONO, NEIL  
11204 CLAYRIDGE DR  
TAMPA, FL 33635 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 BUONO, NEIL  
Address 11204 CLAYRIDGE DR  
City-State-Zip: TAMPA FL 33635

Title MGR  
Name BUONO, JENNIFER  
Address 11204 CLAYRIDGE DR  
City-State-Zip: TAMPA FL 33635

*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:** NEIL BUONO

**OWNER**

**02/28/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date