

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M15000001232

**Entity Name:** MAGICAL ADVENTURES TRAVEL LLC

**Current Principal Place of Business:**

160 SILVER LEAF TRAIL  
EDEN, NC 27288

**Current Mailing Address:**

160 SILVER LEAF TRAIL  
EDEN, NC 27288 US

**FEI Number: 45-4000443**

**Certificate of Status Desired: Yes**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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            OWNR  
Name            FLEMING, CATHY  
Address        160 SILVER LEAF TRAIL  
City-State-Zip: EDEN NC 27288

*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: CATHY FLEMING**

**OWNER**

**06/02/2016**

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

\_\_\_\_\_ Date