

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016698

Entity Name: BLACK WING CAPITAL, LLC

Current Principal Place of Business:

16585 N.W. 2ND AVE., SUITE 400
NORTH MIAMI BEACH, FL 33169

Current Mailing Address:

6231 PGA BLVD. SUITE 104
PMB #172
PALM BEACH GARDENS, FL 33418

FEI Number: 87-0695773

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RICHMAN, HARVEY
16585 N.W. 2ND AVE., SUITE 400
NORTH MIAMI BEACH, FL 33169 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	Title	MR.
Name	FRIED, MICHAEL	Name	NISULA, BRIAN
Address	6231 PGA BLVD. SUITE 104, PMB #172	Address	6231 PGA BLVD. SUITE 104 PMB #172
City-State-Zip:	PALM BEACH GARDENS FL 33418	City-State-Zip:	PALM BEACH GARDENS FL 33418

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL FRIED

MEMBER

01/14/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date