

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000003044

Entity Name: WINTERWIND MANAGEMENT, LLC

Current Principal Place of Business:

17555 COLLINS AVENUE
APT 507
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

17555 COLLINS AVENUE
APT 507
SUNNY ISLES BEACH, FL 33160

FEI Number: 27-4534540

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MEDGE, INNA
17555 COLLINS AVENUE
APT 507
SUNNY ISLES BEACH, FL 33160 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 MEDGE, INNA
Address 17555 COLLINS AVENUE, APT 507
City-State-Zip: SUNNY ISLES BEACH FL 33160

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: INNA MEDGE

MANAGER

04/08/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date