

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000076225

Entity Name: WAMMS LLC**Current Principal Place of Business:**436 SUNSET RD N
ROTONDA WEST, FL 33947**Current Mailing Address:**35-37 KOMORN STREET
NEWARK, NJ 07105**FEI Number:** 45-2660823**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TIMELINE BUSINESS CENTER LLC
8981 DANIELS CENTER DR
208
FORT MYERS, FL 33912 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:** ISMAEL CARDOSO

04/04/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	WENCESLAU, ALIPIO	Name	WENCESLAU, MARIA
Address	35-37 KOMORN ST	Address	35-37 KOMORN ST
City-State-Zip:	NEWARK NJ 07105	City-State-Zip:	NEWARK NJ 07105
Title	MGR	Title	MGR
Name	WENCESLAU, MARGARIDA	Name	WENCESLAU, SANDRA
Address	35-37 KOMORN ST	Address	35-37 KOMORN ST
City-State-Zip:	NEWARK NJ 07105	City-State-Zip:	NEWARK NJ 07105

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: ALIPIO WENCESLAU**PRESIDENT**

04/04/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date