

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000091568

Entity Name: WIBICH, LLC**Current Principal Place of Business:**1989 NW 88TH CT
SUITE 101
DORAL, FL 33172**Current Mailing Address:**1989 NW 88TH CT
SUITE 101
DORAL, FL 33172 US**FEI Number:** 46-1162913**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WERMUTH PANELL & ORTIZ, PLLC
C/O ELI PANELL, ESQ., CPA, CFP(R), LL.M
1989 NW 88TH CT, SUITE 101
DORAL, FL 33172 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:** ELIEZER PANELL, ESQ., CPA, CFP(R), LL.M

04/26/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name RIVERA, MARGARITA B
Address 1989 NW 88TH CT
SUITE 101
City-State-Zip: DORAL FL 33172

Title AMBR
Name ERCOLESSI, GUILLERMO J
Address 1989 NW 88TH CT
SUITE 101
City-State-Zip: DORAL FL 33178

Title AMBR
Name ERCOLESSI, MARIA F
Address 1989 NW 88TH CT
SUITE 101
City-State-Zip: DORAL FL 33172

Title AMBR
Name ERCOLESSI, SEBASTIAN
Address 1989 NW 88TH CT
SUITE 101
City-State-Zip: DORAL FL 33172

Title AMBR
Name ERCOLESSI, LUCIA B
Address 1989 NW 88TH CT
SUITE 101
City-State-Zip: DORAL FL 33172

Title AMBR
Name ERCOLESSI, MARGARITA
Address 1989 NW 88TH CT
SUITE 101
City-State-Zip: DORAL FL 33172

Title AMBR
Name ERCOLESSI, MATIAS
Address 1989 NW 88TH CT
SUITE 101
City-State-Zip: DORAL FL 33172

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: MATIAS ERCOLESSI

AMBR

04/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date