# 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.

MANAGER

SIGNATURE: PHILIPPE SCEMAMA

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L12000104792 Entity Name: WELLINGTON ASSETS, LLC

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## Current Principal Place of Business:

3363 NE 163 STREET SUITE 502 NORTH MIAMI BEACH, FL 33160

### **Current Mailing Address:**

3363 NE 163 STREET SUITE 502 NORTH MIAMI BEACH, FL 33160 US

### FEI Number: 46-0782324

### Name and Address of Current Registered Agent:

PAUL FELDMAN, P.A. 2750 NE 185 STREET SUITE 303 AVENTURA, FL 33180 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	: PAUL FELDMAN			04/14/2017
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	CEO	Title	MGRM	
Name	SCEMAMA, PHILIPPE	Name	SCEMAMA, ELISA	
Address	3363 NE , 163 STREET UNIT 502	Address	3363 NE , 163 STREET UNIT 502	
City-State-Zip:	NORTH MIAMI BEACH FL 33160	City-State-Zip:	NORTH MIAMI BEACH FL 331	60

FILED Apr 14, 2017 Secretary of State CC6958349113

Certificate of Status Desired: Yes

04/14/2017