

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000104792

**Entity Name:** WELLINGTON ASSETS, LLC

**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

**Certificate of Status Desired:** No

**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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name SCEMAMA, PHILIPPE  
Address 19111 COLLINS AVENUE, UNIT 1705  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title MGRM  
Name SCEMAMA, ELISA  
Address 19111 COLLINS AVENUE, UNIT 1705  
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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SCEMAMA PHILIPPE

**MGRM**

**04/30/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date