#### 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000008463

Entity Name: WNWD MANAGEMENT, LLC

## **Current Principal Place of Business:**

19950 W. COUNTRY CLUB DRIVE 900 AVENTURA, FL 33180

# **Current Mailing Address:**

19950 W. COUNTRY CLUB DRIVE 900 AVENTURA, FL 33180 US

## FEI Number: APPLIED FOR

#### Name and Address of Current Registered Agent:

YANINA MICULITZKI, ESQ 20801 BISCAYNE BLVD STE 306 AVENTUTRA, 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

#### Authorized Person(s) Detail :

	Title	MGR	Title	MGR
	Name	AMKIE LEVY, ELIAS	Name	MICULITZKI, MARTIN
	Address	19950 W. COUNTRY CLUB DRIVE, SUITE 900	Address	19950 W. COUNTRY CLUB DRIVE, SUITE 903
	City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180
	Title	MANAGER	Title	MANAGER
	Name	CABABIE DANIEL, ELIAS	Name	CABABIE DANIEL, ABRAHAM
	Address	19950 W. COUNTRY CLUB DRIVE 900	Address	19950 W. COUNTRY CLUB DRIVE 900
	City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180

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: MARTIN MICULITZKI

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 07, 2017 Secretary of State CC8368482211

Certificate of Status Desired: No

Date