

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000149627

Entity Name: WMIN, LLC

Current Principal Place of Business:

C/O DAVID M BOGGS, ESQ.
201 N FRANKLIN ST STE 2000
TAMPA, FL 33602

Current Mailing Address:

C/O DAVID M BOGGS, ESQ
PO BOX 1531
TAMPA, FL 33601

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOGGS, DAVID M
201 N FRANKLIN ST STE 2000
TAMPA, FL 33602 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 MGR & P
Name CURTIS, W. BYRON JR.
Address 201 N. FRANKLIN STREET
SUITE 2000
City-State-Zip: TAMPA FL 33602

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: CURTIS , W. BYRON , JR.

MGR & P

05/01/2015

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date