

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000190584

**Entity Name:** WET PAPER, LLC

**Current Principal Place of Business:**

545 W FLAGLER ST  
MIAMI , FL 33130

**Current Mailing Address:**

545 W FLAGLER ST  
MIAMI , FL 33130 US

**FEI Number:** 81-0757252

**Certificate of Status Desired:** No

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

TURNER, AARON  
545 W FLAGLER ST  
MIAMI , FL 33130 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:** AARON TURNER

09/26/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title OWNER  
Name SAMY , EDDY A  
Address 12973 SW 112ST SUITE #231  
City-State-Zip: MIAMI FL 33186

Title OWNER  
Name KWIA , GEORGE V  
Address 12973 SW 112ST SUITE #231  
City-State-Zip: MIAMI FL 33186

Title MANAGING PARTNER  
Name TURNER, AARON  
Address 545 W FLAGLER ST  
City-State-Zip: MIAMI FL 33130

*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:** AARON TURNER

MANAGING PARTNER

09/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date