

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000066725

Entity Name: N.W.FAIL "LLC"

Current Principal Place of Business:

2230 EASTMAN LN
CANTONMENT, FL 32533

Current Mailing Address:

2230 EASTMAN LN
CANTONMENT, FL 32533

FEI Number: 59-2090307

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FAIL, NEEDHAM
2230 EASTMAN LN
CANTONMENT, FL 32533 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
Name FAIL, NEEDHAM
Address 2230 EASTMAN LN
City-State-Zip: CANTONMENT FL 32533

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: NEEDHAM FAIL

MANAGER

04/26/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date