# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000027874

Entity Name: WHOLE WOOD CABINS LLC

# Current Principal Place of Business:

36750 U.S. HWY 19 N #4-2269 PALM HARBOR, FL 34684

# **Current Mailing Address:**

36750 U.S. HWY 19 N #4-2269 PALM HARBOR, FL 34684 US

# FEI Number: 36-4861656

### Name and Address of Current Registered Agent:

LEGALINC CORPORATE SERVICES, INC. 5237 SUMMERLIN COMMONS SUITE 400 FORT MYERS, FL 33907 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	AMBR
Name	VENDLA, JAAN
Address	36750 U.S. HWY 19 N #4-2269
City-State-Zip:	PALM HARBOR FL 34684

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.

JV

# SIGNATURE: JAAN VENDLA

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 20, 2018 Secretary of State CC5212001226

Certificate of Status Desired: No

Date

04/20/2018 Date