

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000145220

**Entity Name:** WNWGALORE LLC

**Current Principal Place of Business:**

820 EAST JOHNSON AVENUE  
PENSACOLA, FL 32514

**Current Mailing Address:**

820 EAST JOHNSON AVENUE  
PENSACOLA, FL 32514 US

**FEI Number:** 83-0895736

**Certificate of Status Desired:** No

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

KRISTIN HARNED, ERIKA  
820 EAST JOHNSON AVENUE  
PENSACOLA, FL 32514 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            AMBR  
Name            HARNED, CODY  
Address        820 EAST JOHNSON AVENUE  
City-State-Zip: PENSACOLA FL 32514

Title            AMBR  
Name            HARNED, ERIKA  
Address        820 EAST JOHNSON AVENUE  
City-State-Zip: PENSACOLA FL 32514

*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:** CODY HARNED

04/14/2019

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date