

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000220874

**Entity Name:** ROBBINS WINGS, LLC

**Current Principal Place of Business:**

4575 ORTEGA ISLAND DRIVE  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

4575 ORTEGA ISLAND DRIVE  
JACKSONVILLE, FL 32210

**FEI Number:** 83-1958675

**Certificate of Status Desired:** No

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

PULIGNANO, NICHOLAS V JR  
1200 RIVERPLACE BOULEVARD SUITE 800  
JACKSONVILLE, FL 32207 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	Title	MBR
Name	ROBBINS, DOUGLAS P	Name	ROBBINS, IVONNE L
Address	4575 ORTEGA ISLAND DRIVE	Address	4575 ORTEGA ISLAND DRIVE
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210

*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:** IVONNE L ROBBINS

MBR

02/01/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date