Electronic Signature of Signing Authorized Person(s) Detail

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000283050

Entity Name: WONDROUS ENTERPRISE LLC

Current Principal Place of Business:

6889 COLLEGE CT. 7-204 DAVIE, FL 33317

Current Mailing Address:

6889 COLLEGE CT. 7-204 DAVIE, FL 33317

FEI Number: 83-3069415

Name and Address of Current Registered Agent:

PRANDI, MICHELE A 6889 COLLEGE CT. 7-204 DAVIE, FL 33317 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	MANAGER	Title	MANAGER
Name	RESSLER, ANDREW D	Name	PRANDI, MICHELE A
Address	6889 COLLEGE CT.	Address	6889 COLLEGE CT.
City-State-Zip:	DAVIE FL 33317	City-State-Zip:	DAVIE FL 33317

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: MICHELE ANN PRANDI

MANAGER

03/19/2020

Date

FILED Mar 19, 2020 Secretary of State 2668340202CC

Certificate of Status Desired: No

Date