

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000221751

**Entity Name:** 3GW2 REALTY LLC

**Current Principal Place of Business:**

4855 LENOX AVE  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

4855 LENOX AVE  
JACKSONVILLE, FL 32205

**FEI Number:** 84-3015275

**Certificate of Status Desired:** No

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

GUTIERREZ, ROBERT  
4855 LENOX AVE  
JACKSONVILLE, FL 32205 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 GUTIERREZ, ROBERT  
Address 995 WATER ST. APT. 532  
City-State-Zip: JACKSONVILLE FL 32204

Title AMBR  
Name GUTIERREZ, VICTOR O JR.  
Address 4855 LENOX AVE  
City-State-Zip: JACKSONVILLE FL 32205

Title AMBR  
Name GUTIERREZ, ORLANDO L  
Address 4855 LENOX AVE  
City-State-Zip: JACKSONVILLE FL 32205

Title AMBR  
Name WHITE, BRIAN B  
Address 4166 SAN JUAN AVE  
City-State-Zip: JACKSONVILLE FL 32210

Title AMBR  
Name WEBB, DEMETRICE A  
Address 343 PECAN GROVE DR  
City-State-Zip: ORANGE PARK FL 32073

*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:** ROBERT GUTIERREZ

AMBR

03/19/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date