

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000288642

**Entity Name:** WDSQUARED LLC**Current Principal Place of Business:**7 NW 26TH ST  
GAINESVILLE, FL 32607**Current Mailing Address:**1710 NW 23RD ST  
GAINESVILLE, FL 32605**FEI Number:** 84-3739105**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DELANEY, ALLEN G  
1710 NW 23RD ST  
GAINESVILLE, FL 32605 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  
Name BRTUCE D DELANEY, TRUSTEE, BDD  
REVOCABLE TRUST  
Address 1710 NW 23RD ST  
City-State-Zip: GAINESVILLE FL 32605

Title MGR  
Name ALLEN G DELANEY, TRUSTEE, AGD  
REVOCABLE TRUST  
Address 2603 NW 13TH ST BOX 136  
City-State-Zip: GAINESVILLE FL 32609

Title MGR  
Name RICHARD WALLMAN, TRUSTEE,  
WALLMAN FAMILY TRUST  
Address 444 SYLVIA ST  
City-State-Zip: ENCINITAS CA 92024

*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:** ALLEN G DELANEY, TRUSTEE AGD REV TRST

MANAGER

02/02/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date