

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000088046

**Entity Name:** WCOR LLC

**Current Principal Place of Business:**

2655 S. LE JEUNE ROAD  
SUITE PH-1C  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2655 S. LE JEUNE ROAD  
SUITE PH-1C  
CORAL GABLES, FL 33134

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

GASTON R. ALVAREZ, P. A.  
2655 S. LE JEUNE ROAD  
SUITE PH-1C  
CORAL GABLES, FL 33134 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 WALKER, IGNACIO  
Address 201 CRANDON BLVD., #173  
City-State-Zip: KEY BISCAYNE FL 33149

*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:** IGNACIO WALKER

**MANAGER**

**04/08/2022**

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

\_\_\_\_\_  
Date