

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000446813

**Entity Name:** WI POOL & TILE LLC

**Current Principal Place of Business:**

7840 LILAC LN  
APT 516  
PENSACOLA, FL 32514

**Current Mailing Address:**

7840 LILAC LN  
APT 516  
PENSACOLA, FL 32514 US

**FEI Number:** 93-3646474

**Certificate of Status Desired:** No

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

DE ARAUJO SANTIAGO, WITER  
7840 LILAC LN  
APT 516  
PENSACOLA, FL 32514 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            DE ARAUJO SANTIAGO, WITER  
Address        7840 LILAC LN APT 516  
City-State-Zip: PENSACOLA FL 32514

Title            AMBR  
Name            SILVA DE OLIVEIRA, ISMAEL  
Address        7840 LILAC LN APT 516  
City-State-Zip: PENSACOLA FL 32514

*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:** WITER DE ARAUJO SANTIAGO

AMBR

02/02/2024

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

\_\_\_\_\_  
Date