

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000079097

**FILED**  
**Mar 05, 2012**  
**Secretary of State**

**Entity Name:** THE WILENS, L.L.C.

**Current Principal Place of Business:**

21050 POINT PLACE  
2404  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

21050 POINT PLACE  
2404  
AVENTURA, FL 33180

**New Mailing Address:**

**FEI Number:** 20-3301010

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NICENBOIM, JOSE  
169 E. FLAGLER ST.  
SUITE #1534  
MIAMI, FL 33131 US

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

WILENSKY, LEON MIGUEL  
21050 POINT PLACE  
SUITE #2404  
AVENTURA, FL 33180 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:** LEON MIGUEL WILENSKY

03/05/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** WILENSKY, LEON MIGUEL A  
**Address:** 21050 POINT PLACE #2404  
**City-St-Zip:** AVENTURA, FL 33180

**Title:** MGR  
**Name:** WILENSKY, BEATRIZ MONICA  
**Address:** 21050 POINT PLACE #2404  
**City-St-Zip:** AVENTURA, FL 33180

I hereby certify that the information indicated on this 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 608, Florida Statutes.

**SIGNATURE:** LEON MIGUEL WILENSKY

MGR

03/05/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date