

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000019904

**Entity Name:** WILLGOLD, LLC

**Current Principal Place of Business:**

5801 N.W. 151 STREET  
SUITE 307  
MIAMI LAKES, FL 33014

**Current Mailing Address:**

5801 N.W. 151 STREET  
SUITE 307  
MIAMI LAKES, FL 33014

**FEI Number:** 56-2566282

**Certificate of Status Desired:** No

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

GOLD, STUART M  
5801 N.W. 151 STREET  
SUITE 307  
MIAMI LAKES, FL 33014 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	MGRM	Title	MGRM
Name	GOLD, STUART M	Name	WILLINGER, SCOTT R
Address	5801 N.W. 151 STREET, SUITE 307	Address	5801 N.W. 151 STREET, SUITE 307
City-State-Zip:	MIAMI LAKES FL 33014	City-State-Zip:	MIAMI LAKES FL 33014
Title	MGRM	Title	MGRM
Name	GOLD, GAYLE R	Name	WILLINGER, LINDA
Address	5801 N.W. 151 STREET, SUITE 307	Address	5801 N.W. 151 STREET, SUITE 307
City-State-Zip:	MIAMI LAKES FL 33014	City-State-Zip:	MIAMI LAKES FL 33014

*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:** STUART M. GOLD MGRM 01/09/2017  
\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail Date