

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000044944

Entity Name: PAMELA S. WYNN, LLC

Current Principal Place of Business:

610 S PALMWAY
LAKE WORTH, FL 33460

Current Mailing Address:

POST OFFICE BOX 1374
LAKE WORTH, FL 33460 US

FEI Number: 26-2562202

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WYNN, PAMELA S
610 S PALMWAY
LAKE WORTH, FL 33460 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
Name WYNN, PAMELA S
Address POST OFFICE BOX 1374
City-State-Zip: LAKE WORTH FL 33460

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: PAMELA S WYNN

MGMBM

04/13/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date