

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000128901

**Entity Name:** NWF CONSULTING, LLC

**Current Principal Place of Business:**

4622 SUMMERDALE BLVD.  
PACE, FL 32571

**Current Mailing Address:**

PO BOX 11219  
PENSACOLA, FL 32524 US

**FEI Number:** 27-4285938

**Certificate of Status Desired:** No

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

DOWNEY, HARRELL G  
4622 SUMMERDALE BLVD.  
PACE, FL 32571 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 DOWNEY, HARRELL  
Address 4622 SUMMERDALE BLVD.  
City-State-Zip: PACE FL 32571

*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:** HARRELL DOWNEY

MANAGER

03/21/2017

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

\_\_\_\_\_ Date