

**2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000092471

**Entity Name:** PETER WSFOUR LLC

**Current Principal Place of Business:**

3619 KARIBA CT  
KISSIMMEE, FL 34746

**Current Mailing Address:**

3619 KARIBA CT  
KISSIMMEE, FL 34746

**FEI Number:** 46-2299163

**Certificate of Status Desired:** No

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

VEGA, PEDRO A  
3619 KARIBA CT  
KISSIMMEE, FL 34746 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:** PEDRO A VEGA

11/14/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name VEGA, PEDRO A  
Address 3619 KARIBA CT  
City-State-Zip: KISSIMMEE FL 34746

*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:** PEDRO A VEGA

MANAGING MEMBER

11/14/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date