

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000094519

**FILED**  
**Jun 29, 2020**  
**Secretary of State**  
**6358678858CC**

**Entity Name:** ESTATE OF KUNO J. CRAMER, LLC

**Current Principal Place of Business:**

JAMES MCCARTNEY WEARN P.A.  
THE WHITNEY SUITE 105, 410 EVERNIA ST  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

JAMES MCCARTNEY WEARN P.A.  
THE WHITNEY SUITE 105, 410 EVERNIA ST  
WEST PALM BEACH, FL 33401

**FEI Number:** 46-3217514

**Certificate of Status Desired:** No

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

WEARN, JAMES MCC.  
THE WHITNEY SUITE 105  
410 EVERNIA ST  
WEST PALM BEACH, FL 33401 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 WEARN, JAMES MCC.  
Address THE WHITNEY, STE. 105 410  
EVERNIA ST  
City-State-Zip: WEST PALM BEACH FL 33401

Title MANAGER  
Name MEEHAN, HELGA  
Address 7020 HALF MOON CIRCLE  
APT. 203  
City-State-Zip: HYPOLUXO FL 33462

*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:** JAMES MCC. WEARN

**MANAGER**

**06/29/2020**

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

\_\_\_\_\_  
Date