FEI Number:	47-2883925	Certificate of Status Desired:
Name and Ad	dress of Current Registered Agent:	
FERRERA, SANE 500 S. DIXIE HIG SUITE 304 CORAL GABLES,	HWAY	
The above named e	ntity submits this statement for the purpose of changing its registered office or regi	stered agent, or both, in the State of Florida.
SIGNATURE:	SANDRA FERRERA	01/
	Electronic Signature of Registered Agent	

Authorized Person(s) Detail :				
Title	AMBR	Title	AMBR	
Name	GARCIA, ALBERT	Name	GARCIA, MERCEDES D	
Address	P.O. BOX 370428	Address	P.O. BOX 370428	
City-State-Zip:	MIAMI FL 33137	City-State-Zip:	MIAMI FL 33137	
Title	AMBR			
Name	GARCIA, ALBERTO			
Address	P.O. BOX 370428			
City-State-Zip:	MIAMI FL 33137			

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.

AMBR

SIGNATURE: ALBERTO GARCIA

Electronic Signature of Signing Authorized Person(s) Detail

P.O. BOX 370428 MIAMI, FL 33137 US

# FE

## Ν

**Current Mailing Address:** 

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000011950

### Entity Name: WYNWOOD VENTURES LLC

**Current Principal Place of Business:** 

2600 NORTH MIAMI AVENUE MIAMI, FL 33127

# Jan 16, 2018 **Secretary of State** CC3040906855

FILED

esired: No

01/16/2018

Date

01/16/2018 Date