

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000173440

**Entity Name:** FLYWAYS VENTURES LLC**Current Principal Place of Business:**13870 CRESTON PLACE  
WELLINGTON, FL 33414**Current Mailing Address:**13870 CRESTON PLACE  
WELLINGTON, FL 33414 US**FEI Number:** 82-4008561**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WEDGE ASSOCIATES LLC  
12180 SOUTH SHORE BLVD., SUITE 101A  
WELLINGTON, FL 33414 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:** WILLIAM J WEDGE, ESQ.

02/07/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                     |
|-----------------|---------------------|
| Title           | AMBR                |
| Name            | VAN DER MEER, FREEK |
| Address         | 13870 CRESTON PLACE |
| City-State-Zip: | WELLINGTON FL 33414 |

|                 |                     |
|-----------------|---------------------|
| Title           | AMBR                |
| Name            | HENDRICKX, LIEVEN   |
| Address         | 13870 CRESTON PLACE |
| City-State-Zip: | WELLINGTON FL 33414 |

|                 |                      |
|-----------------|----------------------|
| Title           | AMBR                 |
| Name            | VAN DER MEER, WOUTER |
| Address         | LEEUVENRIKENLAAN 45  |
| City-State-Zip: | 1780 WEMMEL BELGIUM  |

|                 |                                    |
|-----------------|------------------------------------|
| Title           | MGR                                |
| Name            | WEDGE, WILLIAM J ESQ               |
| Address         | 12180 SOUTH SHORE BLVD, SUITE 101A |
| City-State-Zip: | WELLINGTON FL 33414                |

*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:** WILLIAM J. WEDGE, ESQ.

MANAGER

02/07/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date