

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000192656

Entity Name: WILGAIN SERVICES LLC

Current Principal Place of Business:

3209 1/2 E ELLICOTT ST
TAMPA, FL 33610

Current Mailing Address:

3209 1/2 E ELLICOTT ST
TAMPA, FL 33610

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, FREZELL
3209 1/2 E ELLICOTT ST
TAMPA, FL 33610 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: FREZELL WILSON

04/30/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name WILSON, FREZELL
Address 1411 E 27TH AVE
City-State-Zip: TAMPA FL 33605

Title AMBR
Name GAINOUS, DANIELLE
Address 3209 E ELLICOTT ST
City-State-Zip: TAMPA FL 33610

Title AMBR
Name WILSON, JADA
Address 3209 E ELLICOTT ST
City-State-Zip: TAMPA FL 33610

Title AMBR
Name GAINOUS, TYLER
Address 3209 E ELLICOTT ST
City-State-Zip: TAMPA FL 33610

Title AMBR
Name LIVE, GLORIA
Address 1411 E 27TH AVE
City-State-Zip: TAMPA FL 33610

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: FREZELL A WILSON

MGR

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date