

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000014500

Entity Name: WADEKO LLC

Current Principal Place of Business:

1750 N BAYSHORE DRIVE
1217
MIAMI, FL 33132

Current Mailing Address:

PO BOX 942522
MIAMI, FL 33194

FEI Number: 81-2792314

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WADE, DWYANE SR
1750 N BAYSHORE DRIVE
1217
MIAMI, FL 33132 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 WADE, DWYANE SR
Address PO BOX 942522
City-State-Zip: MIAMI FL 33194

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: DWYANE WADE SR.

MGR

03/27/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date