

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000071920

Entity Name: WILKAMY, LLC

Current Principal Place of Business:

725 MOORE AVE
JACKSONVILLE, FL 32208

Current Mailing Address:

725 MOORE AVE
JACKSONVILLE, FL 32208

FEI Number: 81-2479527

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILKERSON, JARED M
725 MOORE AVE
JACKSONVILLE, FL 32208 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 WILKERSON, AMY A
Address 725 MOORE AVE
City-State-Zip: JACKSONVILLE FL 32208

Title AMBR
Name WILKERSON, JARED M ESQ.
Address 725 MOORE AVE
City-State-Zip: JACKSONVILLE FL 32208

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: JARED M. WILKERSON

AMBR/REGISTERED
AGENT

01/20/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date