

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000223346

Entity Name: STORM WIGS, LLC

Current Principal Place of Business:

17090 NW 7TH AVE EXT
108
MIAMI, FL 33169

Current Mailing Address:

PO BOX 14693
FT LAUDERDALE, FL 33302

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MICHEL, JIMMY
400 NW 7TH AVE
14693
FT LAUDERDALE, FL 33311 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 DEPEINE, HANNASTHAZIA
Address 17090 NW 7TH AVE EXT, 108
City-State-Zip: MIAMI FL 33169

Title AMBR
Name MICHEL, JIMMY
Address 17090 NW 7TH AVE EXT, 108
City-State-Zip: MIAMI FL 33169

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: HANNASTHAZIA DEPEINE

MGR

04/10/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date