

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000283956

**Entity Name:** WILLIAMSON 305, LLC

**Current Principal Place of Business:**

20200 W DIXIE HWY  
SUITE 1009  
AVENTURA, FL 33180

**Current Mailing Address:**

20200 W DIXIE HWY  
SUITE 1009  
AVENTURA, FL 33180 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GOMEZ, SEBASTIAN A SR  
1317 CHENILLE CIRCLE  
WESTON, FL 33327 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 THOMAS, CARLOS ERICO SR  
Address 800 SE 4TH AVENUE  
SUITE 704  
City-State-Zip: HALLANDALE BEACH FL 33009

Title MGR  
Name TEZANOS PINTO, JORGE SR  
Address 16901 COLLINS AVE  
APT 1404  
City-State-Zip: SUNNY ISLES FL 33160

Title MGR  
Name GOMEZ, SEBASTIAN A SR  
Address 1317 CHENILLE CIRCLE  
City-State-Zip: WESTON FL 33327

*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:** SEBASTIAN A GOMEZ

**MANAGING MEMBER**

**01/18/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date