## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000217887

Entity Name: XCLUS3 WINKS LLC

**Current Principal Place of Business:** 

527 W HULL AVE OAKLAND, FL 34760

**Current Mailing Address:** 

P.O. BOX 383

OAKLAND, FL 34760 US

FEI Number: 85-2493468 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

OSBOURNE, NEVISHIA T 527 W HULL AVE OAKLAND, FL 34760 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

**FILED** Jan 04, 2021

**Secretary of State** 

0991366786CC

Authorized Person(s) Detail:

Title **MANAGER** 

Name OSBOURNE, NE'VISHIA T.

Address 527 W HULL AVE

City-State-Zip: OAKLAND FL 34760

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: NE'VISHIA T. OSBOURNE

**MANAGER** 

01/04/2021