

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000273651

Entity Name: 3107 WD, LLC**Current Principal Place of Business:**3107 W DUNNELLON RD
DUNNELLON, FL 34433**Current Mailing Address:**PO BOX 5159
SPRING HILL, FL 34611**FEI Number:** 85-3116601**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VERMETTE, DREW T
11475 OLD SQUAW AVE
WEEKI WACHEE, FL 34614 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	MANAGER
Name	MAZZUCO, PHILIP
Address	8090 SUGARBUSH DR
City-State-Zip:	SPRING HILL FL 34606

Title	MANAGER
Name	VERMETTE, DREW
Address	11475 OLD SQUAW AVE
City-State-Zip:	WEEKI WACHEE FL 34614

Title	MANAGER
Name	MAZZUCO, MICHAEL
Address	6499 SUGAR TREE DR
City-State-Zip:	SPRING HILL FL 34607

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: DREW VERMETTE

MANAGER

01/23/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date