

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000311025

**Entity Name:** DWPM VENTURES LLC

**Current Principal Place of Business:**

6 AMBROSE LANE  
SOUTH BARRINGTON, IL 60010

**Current Mailing Address:**

6 AMBROSE LANE  
SOUTH BARRINGTON, IL 60010 US

**FEI Number:** 87-2093984

**Certificate of Status Desired:** No

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

J. MARC JONES, P.A.  
7250 RED BUG LAKE ROAD  
SUITE 1012  
OVIEDO, FL 32765 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 WALLEN, ROBERT N  
Address 6 AMBROSE LANE  
City-State-Zip: SOUTH BARRINGTON IL 60010

Title MGR  
Name MILLER, ALAN G  
Address 35 W 635 PARSONS ROAD  
City-State-Zip: WEST DUNDEE IL 60118

*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:** ROBERT N WALLEN

**MANAGER**

**02/06/2024**

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

\_\_\_\_\_  
Date