

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000034660

**Entity Name:** 7301 WILES RD. LLC

**Current Principal Place of Business:**

7301 WILES ROAD  
UNIT 204  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

2713 NW 70TH BLVD  
BOCA RATON, FL 33946

**FEI Number:** 88-0531988

**Certificate of Status Desired:** No

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

STELZER, NICOLE  
2713 NW 70TH BLVD  
BOCA RATON, FL 33496 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 STELZER, NICOLE  
Address 2713 NW 70TH BLVD  
City-State-Zip: BOCA RATON FL 33496

Title MGR  
Name STELZER, CRAIG  
Address 2713 NW 70TH BLVD  
City-State-Zip: BOCA RATON FL 33496

Title MGR  
Name ROMANO, RICHARD  
Address 4204 BOCAIRE BLVD  
City-State-Zip: BOCA RATON FL 33487

Title MGR  
Name ROMANO, SHENEE  
Address 4204 BOCAIRE BLVD  
City-State-Zip: BOCA RATON FL 33487

*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:** NICOLE STELZER

**MGR**

**03/13/2023**

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

\_\_\_\_\_  
Date