

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000428868

**Entity Name:** CWLS LLC

**Current Principal Place of Business:**

4941 HORACE LUNSFORD RD  
MILTON, FL 32570

**Current Mailing Address:**

4941 HORACE LUNSFORD RD  
NO, FL 32570 UN

**FEI Number:** 88-4151617

**Certificate of Status Desired:** No

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

CUKJATI, JACOB P III  
5780 AVENIEDA ROBLEDAL  
PENSACOLA, FL 32504 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 WALTHER, WILLIAM C JR  
Address 4941 HORACE LUNSFORD RD  
City-State-Zip: MILTON FL 32570

*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:** WALTHER, WILLIAM C , JR

MANAGER

03/17/2023

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

\_\_\_\_\_ Date