

A11000000265

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

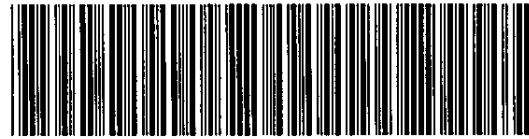
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

AUG 25 2014
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WT, LLLP
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A11000000265

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Judd Rowe, Esq.
Contact Person
JUDD ROWE, P.A.
Firm/Company
200 Butler St., Ste. 207
Address
West Palm Beach, FL 33407
City, State and Zip Code
jrpalaw@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Judd Rowe, Esq. at (561) 366-1355
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. WT, LLLP
Name of Limited Partnership or Limited Liability Limited Partnership

2. 03/31/2011 3. A11000000265
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

NRAI SERVICES, INC.
Name
1200 South Pine Island Road
Address
Plantation, FL 33324
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Judd Rowe, Esq.
Name
200 Butler St., Ste. 207
Florida street address (P.O. Box not acceptable)
West Palm Beach FL 33407
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Cathy W. Sharkey
Signature of General Partner

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Judd Rowe
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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