

3/10/23, 11:05 AM

Division of Corporations

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

A2000000221

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000092429 3)))



H230000924293ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
 Fax Number : (850)617-6383

From: Account Name : BUSINESS FILINGS
 Account Number : 105256001620
 Phone : (608)827-5300
 Fax Number : (608)827-5501

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Amoyer@knightdev.co

RECEIVED

2023 MAR 10 PM 1:55

DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

**REGISTERED AGENT CHANGE
 THE WM AT THE RIVER, LP**

| | |
|-----------------------|----------------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$35.00 |

2023 MAR 10 PM 2:46

RECEIVED
 MAR 10 2023

Electronic Filing Menu

Corporate Filing Menu

Help

MAR 13 2023

< Brumby

Fax Audit # H23000092429 3

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. THE WM AT THE RIVER, LP
Name of Limited Partnership or Limited Liability Limited Partnership

2. 6/10/2020 3. A20000000221
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:

CT CORPORATION SYSTEM
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:

Business Filings Incorporated
Name
1200 South Pine Island Road
Florida street address (P.O. Box not acceptable)
Plantation FL 33324
City, State and Zip

2023 MAR 10 PM 2:46
APPROVED AND FILED

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

[Signature]
Signature of General Partner Holly Knight, Member of BGC Advantage, L.L.C. Manager of THE WM GP L.L.C.
Manager of THE WM GP, L.L.C. 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.

[Signature]
Signature of Registered Agent Chris Das, AVP, Business Filings Incorporated

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