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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: 3WA, LLC (Name of Limited Liability Company)			
(Name of Emitted Liability Company)			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Sanford Z. Chevlin, esq. (Name of Person)			
(Firm/Company)			
(Firm/Company)			
200 South Andrews Ave. 84702 (Address)			
F6. Coudundale, FC 3330 / (City/State and Zip Code)			
For further information concerning this matter, please call:			
Sanford Chellin at (954) 668-228 (Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:			
☐ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	LLC		
 (a) Principal office address of limited liability compan (<u>Note: MUST BE STREET ADDRESS</u>) 	y: 4550 RIXLE GREEN PRUY Suite 120 OUTHER CO 3096 FOR SI		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P.O. 30 x 3992 2 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		
4/30/08	40400012375 55 2		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:		
Registered Agent:	PUZZNO, Edwart J. ES.		
Registered Office Address:	101Zipp Switt, PD 1103 E GAST. 15th Floriz Ft. Landwedgle, FL 33301		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW Registered Agent</u> :	W Registered Office address: Sanford Z. Chev), n. esq		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	200 South And REWS AVE For Floric Ft. Lawrendale FL33301		
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.			
Signapore of a member or authorized representative of a member) Grady Lee Williamson III. (Printed or typed name of signee)	-		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the promise from familiar with and accept the obligations of my position F.S. On, if this document is being filed to merely reflect a confirm that the limited liability company has been notified. Authorized Lindow (Signature of Registered Agent)	ngree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change.		
Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314		

FILING FEE: \$25.00