

Division of Corporations

L13000024796 (1/3) Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H14000174204 3)))



H140001742043ABCX

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)617-6380

RE-SUBMIT

From: Account Name : C T CORPORATION SYSTEMS
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

Please file original filing
date of submission 7/22

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

Email Address: _____

**LLC REGISTERED AGENT CHANGE
WELLINGTON PROPERTY COMPANY LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

FILED
TALLAHASSEE, FLORIDA
14 JUL 22 AM 9:13

Electronic Filing Menu Corporate Filing Menu Help

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WELLINGTON PROPERTY COMPANY LLC
Name of Limited 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:

FAITH KIRKPATRICK
Name of Person

MCCOURT GLOBAL
Firm/Company

888 SEVENTH AVENUE, 43RD FL
Address

NEW YORK, NY 10106
City/State and Zip Code

FAITH.KIRKPATRICK@MG.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FAITH KIRKPATRICK at (212) 314-1900
Name of Person 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

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: WELLINGTON PROPERTY COMPANY LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
13700 QUARTER HORSE TRAIL
WELLINGTON, FL 33414

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
888 SEVENTH AVENUE, 43RD FL
NEW YORK, NY 10106

2/18/13

L13000024796

3. 2/18/13 Date of filing/registration in Florida

4. L13000024796 Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

FRANK MCCOURT
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
13700 QUARTER HORSE TRAIL
WELLINGTON, FL 33414

(b) C T Corporation System
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
1200 South Pine Island Road
Plantation, FL 33324

TALLAHASSEE, FL 32314
14 JUL 22 AM 9:13

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.

[Signature]
Signature of a member or authorized representative of a member

FRANK MCCOURT
Printed or typed name of signer

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

C T Corporation System
By: [Signature]
Signature of Registered Agent

[Signature]
[Illegible text]

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00