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(((H160000752593)))



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agentabizalings.

## LLC REGISTERED AGENT CHANGE WW16, LLC

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## H160000752593

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

Pursuant to the provisions of sections 605.0114, 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: WW16, LLC		
2. (a) Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny: 9429 Tradeport Drive Orlando, Florida 32827	
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	9429 Tradeport Drive Orlando, Florida 32827	
7/15/2015	L15000118660	
3. Date of filing/registration in Florida	4. Document number	-
5. (a) Registered Agent and Registered Office shown or	a the records of the Florida Dept.	of State:
Registered Agent:	MAYANNE DOWNS	<del> </del>
Registered Office Address:	301 E. PINE STREET, SUITE 140	
	ORLANDO, FL 32801	70 8
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>	EW Registered Office address:	MAR 2
NEW Registered Agent:	Business Filings Incorporated	SEC OI
NEW Registered Office Address: [MUST BE FLORIDA STREET ADDRESS]	1200 South Pine Island Road	F 60
	Plantation	FL33324
if the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be identified in the change of the limited liability company or as otherwise operating agreement of the limited liability company.	Florida street address of the regis stical. Or, in the case of a Florida s) was/were authorized by an affi	tered office bimited rmative vote of
Signature of a member or authorized representative of a member	···	
Craig C. Mateer, Manager		
Printed or typed name of signee		•
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of no p Chapter 603, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability company with Mark Williams, AVP Business Filings Incorporative of Registered Agent		urther agree to e of un duties, ovided for in istered office f this change.
Division of Corporations, P.O. Box 6	327, Tallahassee, FL 32314	

FILING FEE: \$25.00 INHS18 (12/13)