## 5/5353

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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: GE WCILKEY, INC. Name of Corporation		
DOCUMENT NUMBER: 5/5353		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Amber TrombleW Name of Contact Person		
GE Walker, Inc. Firm/Company		
8416 Laurei Fair Circle STE 100		
TAWIPA, FL 33610 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Amber Trombley at (813) 1023-2481  Name of Contact Person Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 cheek made payable to the Department of State.		

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: GE WALKER, FINC.
2. The principal office address:
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/1/76 Document number: 515353
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)  George F Wolker  4420 F Adamo D Ste 206  Tampa F 33605  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  George Wolker
George WalkER  8416 Lawrel Fair Circle STE 100 57  P.O. BOX NOT acceptable  TAMPA, FL 33610
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.  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 obligation of my position as registered agent. Or lift this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent  5/1/19 Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLMASSEE, FL 32314 CR2E045 (03/12)