839612

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(Requestor's Na	me)
(Address)	
(Address)	
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(City/State/Zip/P	Phone #)
PICK-UP WAIT	MAIL
(Business Entity	Name)
(Document Num	nber)
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DEPART OF STATE

OFFICE OF CORPORATIONS

ON TALL SHASSEE, FLORIDA

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5/28/09



300.			
ORPORATION SERVICE COMPANY.	ACCOUNT NO. :	1200000001	95
	REFERENCE :	999615	7288091
	AUTHORIZATION :	Smell of a	nan
	COST LIMIT :	\$ 35.00	non-
ORDER DATE :	May 19, 2009		
ORDER TIME :	11:32 AM		
ORDER NO. :	999615-186		
CUSTOMER NO:	7288091		
	CHANGE OF AGE	NT	
NAME:	WRC PROPERTIES,	INC.	

PLEASE	RETURN	THE	FOLLOWING	AS	PROOF	OF	FILING:	
XX	CERTIF PLAIN		COPY					
CONTACT	PERSON	l: F	leather Cha	-		· C 1	NTTTALS	

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

statement of cha	inge is submitted for a corporation organ	2, 607.1508, or 617.1508, Florida Statutes, this ized under the laws of the State of Delaware ered agent, or both, in the State of Florida.
1. The name of 1	the corporation: WRCPROPERT	TES, INC.
2. The principal	office address:	
730 Third	l Avenue, 9th Floor, New York	, NY 10017
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 12/02/1977	Document number: 839612
	d street address of the current registered a trment of State:	gent and registered office on file with the
	C T Corporation System	
	1200 South Pine Island Road	- 3c 3
	Plantation, FL 33324	
6. The name and (if changed):	l street address of the new registered ager	nt (if changed) and /or registered office
	Corporation Service Company	25 S
	1201 Hays Street	
	(P.O. Box NOT acceptable)
	Tallahassee, FL 32301	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its registered agent,
Such change was authorized by the	as authorized by resolution duly adopte he board, or the corporation has been no	d by its board of directors or by an officer so tified in writing of the change.
Mun	ha	Maureen Cullen, Attorney in Fact
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent an the appointment as registered agent an to comply with the provisions of all stated I am familiar with and accept the obling filed merely to reflect a change in the seen notified in writing of this change that Service Company	(Printed or typed name and title) and agree to act in this capacity. utes relative to the proper and complete performance ligation of my position as registered agent. Or, if this we registered office address, I hereby confirm that the 05/18/2009
	gnature of Registered Agent)	(Date)
If signing on be	chalf of an entity:	
	. Dawson, Asst. Vice President	
(1	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, TALLAHASSEE, FL 32314