



Division of Corporations Electronic Filing Cover Sheet

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JUN - 1 PM 12: 27

To:

Division of Corporations

Fax Number : (850)617-6380

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

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

Bmail Address:

REGISTERED AGENT CHANGE WISS, JANNEY, ELSTNER ASSOCIATES, INC.

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A. RAMSEY
JUN -2 2022

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To: 18506176380 From: 12147128131 Date: 06/01/22 Time: 6:03 AM Page: 02/03 To: 12143174754 From: anonymous Date: 05/25/22 Time: 3:24 PM Page: 01 850-617-6381 5/25/2022 11:24:49 AM PAGE 1/001 Fax Server



May 25, 2022

FLORIDA DEPARTMENT OF STATE

WISS, JANNEY, ELSTNER ASSOCIATES, INC. 330 PFINGSTEN RD. NORTHBROOK, IL 60062

SUBJECT: WISS, JANNEY, ELSTNER ASSOCIATES, INC.

REF: 843498

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

THE FORM YOU SUBMITTED IS FOR A LLC, BUT YOUR ENTITY IS A CORPORATION. PLEASE DOWNLOAD THE CORPORATION REGISTERED AGENT CHANGE FORM FROM THE WEBSITE AT: WWW.SUNBIZ.ORG.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell FAX Aud. #: H22000183052

Regulatory Specialist II Supervisor Letter Number: 322A00011899

(((H22000183052 3)))

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

statement of cha	inge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Florida Statutes, this morganized under the laws of the State of LLLINOIS registered agent, or both, in the State of Florida.
	the corporation: Wiss, Janney, Elst	•
	office address: 330 PFINGSTEN F	
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 06/18/1979	Document number: 843498
	I street address of the current registment of State: (If resigned, enter	stered agent and registered office on file with the resigned)
	CORPORATION SERVICE COM	IPANY . B
1200 HAYS STREET		
	TALLAHASSEE, FL 32301	
6. The name and (if changed):	I street address of the new register	red agent (if changed) and /or registered office
LEGALINC CORPORATE SERVICES INC.		
5237 SUMMERLIN COMMONS BLVD, SUITE 400		
	FORT MYERS, FL 33907	P.O. Box NOT acceptable
The street addre	ess of its registered office and the	e street address of the business office of its registered agent,
•		adopted by its board of directors or by an officer so been notified in writing of the change.
Stephen J. Safranck		STEPHEN J. SAFRANEK, SECRETARY
I hereby accept I further agree (to comply with the provisions of a	Fruited or typed name and title gent and agree to act in this capacity. all statutes relative to the proper and complete performance the obligation of my position as registered agent. Or, if this ge in the registered office address, I hereby confirm that the change.
CI	6 HOR	05/31/2022
Sig	nature ct Registered Agent	Date
If signing on be	half of an entity:	
ERIK TREUTLI		_
T	yped or Printed Name	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)

* * * FILING FEE: \$35.00 * * *