## ACIOCOSOJ

equestor's Name)					
(Address)					
ldress)					
ty/State/Zip/Phon	e #)				
☐ WAIT	MAIL				
isiness Entity Nar	me)				
(Document Number)					
Certificates of Status					
Filing Officer:					
	į				
	Idress)  Ty/State/Zip/Phon  WAIT  Isiness Entity National Comment Number)				





400280624674

02/02/16--01013--018 \*\*35.00

FILED 16 FEB - 2 FM 12: 23 55 FEB - 2 FM 12: 23

FEB 03 2016 S. YOUNG



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Marissa Rather-lopez MARISSA.RATHER-LOPEZ@CSCGLOBAL.COM

Date: January 29, 2016

Order#: 943942/078

Re: WGCC, LTD.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Marissa Rather-lopez c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1.	WGCC, I	LTD.			
	Name of Limited Partnership or Limite	ed Liability Lir	nited Partnership		
2.	06/15/2001	3.	A0100000807		
Date of filing/registration in Florida			Florida document number		
4. The name of the Department of Sta	ne registered agent and the registered off nte:	ice address as	shown on the reco	ords of the Florida	
	Bluth, Thom	nas M			
	Name			h	
	301 E Las Olas				
	Address Fort Lauderdale	; FL	33301	a a	
	City, State an	ıd Zip		2	
5. The name and	Florida street address of the new registe	red agent and/	or office:	- (4)	
	Corporation Service	e Compan	у	22.	
	Name		<del></del>		
	1201 Hays S	Street			
	Florida street address (P.O.	Box not accep	table)		
	Tallahassee	FL_	32301_		
	City, State an	nd Zip			
6. Such change(s	) is/are effective when filed by the Florid	-	of State.		
Thomas	Jak Jacob V.P.	*			
Signature of Gené	eral Partner				
comply with the pa and I am familiar	ne appointment as registered agent and a provisions of all statutes relative to the pa with an accept the obligations of my po pration Service Company	roper and com sition as regis	plete performance tered agent,	e of my duties.	
By: Usa	, NW		Dawson , AV		
Signature of Kegi	stered Agent *By: WGCC, Inc.,	its general p	oartner		
Filing Fee: Certified Cop	\$35.00 y (optional): \$52.50				