A110000000a65

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DIVISION OF BALL COATS

NUG 25 2014
J. HARRIS

COVER LETTER

TO: Registration Section							
Division of Corporations							
SUBJECT: WT, LLLP Name of Limited Partnership or Limited Liability Limited Partnership							
Name of Limited Pa	artnership or Limited Liability Limited Partnership						
DOCUMENT NUMBER:	A11000000265						
The enclosed Statement of Change of fee(s) are submitted for filing.	of Registered Office and/or Registered Agent and						
Please return all correspondence con	ncerning this matter to:						
Judd Rowe, E	<u> </u>						
Contact Person							
JUDD ROWE,	P.A.						
Firm/Company							
200 Butler St., St	e. 207						
Address							
West Palm Beach, I							
City, State and Zip	Code						
jrpalaw@con							
E-mail address: (to be used for future	annual report notification)						
For further information concerning	this matter, please call:						
Judd Rowe, Esq.	at (561) 366-1355						
Name of Contact Person	Area Code and Daytime Telephone Number						
Enclosed is a \$35.00 check made pa	yable to the Florida Department of State.						
STREET ADDRESS: MAILING ADDRESS:							
Registration Section							
Division of Corporations	Division of Corporations						
Clifton Building	P. O. Box 6327						
2661 Executive Center Circle	Tallahassee, FL 32314						

File 1

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	WT,	WT, LLLP						
_	Name of Limited Partnership or Li	mited Liab	ility Lin	ited Partner	ship			
2.	03/31/2011	3	•	A1100	0000265			
•	Date of filing/registration in Florida		Florida document number					
	The name of the registered agent and the registered partment of State:	d office add	dress as s	shown on the	e records of the Florida			
	NRAI SER\	/ICES, I	NC.		_			
	Na	ıme			•			
	1200 South Pi	_						
	Add	dress			•			
	Plantation							
	City, Sta	te and Zip			AUG			
5.	The name and Florida street address of the new reg	gistered age	ent and/o	or office:	JG 21			
	Judd Ro	we, Esq						
	Na	ıme						
	200 Butler S	 						
	Florida street address (I	P.O. Box no	ot accept	able)	·			
	West Palm Bea	ch	FL	33407				
	City, Sta	te and Zip			-			
6.	Such change(s) is/are effective when filed by the F	lorida Dep	artment	of State.				
(atha la Sharey	·						
Sig	gnature of General Partner	-						
con and Sig	ereby accept the appointment as registered agent amply with the provisions of all statutes relative to to define a supply with the provisions of all statutes relative to to define a supply and accept the obligations of meaning and the supply approximation of Registered Agent ling Fee: \$35.00	he proper d	and com	olete perforn				
	ertified Conv (ontional): \$52.50							