

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

A21000000347

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : M. BURR KEIM COMPANY
Account Number : I19990000242
Phone : (215)563-8113
Fax Number : (215)977-9386

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

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**REGISTERED AGENT CHANGE
WP BOYNTON VILLAS, LP**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

2022 MAY 23 PM 4:18

2022 MAY 23 AM 8:30
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**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. WP BOYNTON VILLAS, LP

Name of Limited Partnership or Limited Liability Limited Partnership

2. July 15, 2021

Date of filing/registration in Florida

3. A21000000347

Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Fowler White Burnett, P.A., Attn: Richard A. Wood

Name

1395 Brickell Avenue, 14th Floor

Address

Miami, FL 33131

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Connor Woodward

Name

5122 SE Lisbon Circle

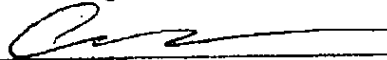
Florida street address (P.O. Box not acceptable)

Stuart

FL 34997

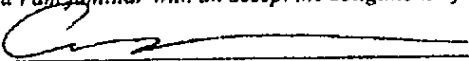
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.



Signature of General Partner

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 obligations of my position as registered agent.



Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

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