

6/4/2018

A99000001184

2018-06-04 10:39:20 CST

19542080845 From: Ranae McGraw

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

REGISTERED AGENT CHANGE
WIMAUMA COMMUNITY, LTD.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$87.50

J. J. EGGETT
JUN 05 2018

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Corporate Filing Menu

Help

**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. Wimauma Community, Ltd.
Name of Limited Partnership or Limited Liability Limited Partnership
2. 06/16/2014 3. A94000001134
Date of filing/registration in Florida 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:

COGENCY GLOBAL INC.
Name
115 North Calhoun St. Suite 4
Address
Tallahassee, FL 32301
City, State and Zip

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

CT Corporation System
Name
1200 South Pine Island Road
Florida street address (P.O. Box not acceptable)
Plantation, FL 33324
City, State and Zip

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

Brian D. Brooks

Signature of General Partner

AHDF-Wimauma G/P, LLC, its General Partner by Brian D. Brooks, Manager

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 an accept the obligations of my position as registered agent.

Angie Sharn

Signature of Registered Agent

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

18 JUN -4 AM 10:49

850-817-6381

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June 4, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

WILLOW CREEK ASSOCIATES, LTD.
1225 17TH STREET STE 1400
DENVER, CO 80202

SUBJECT: WILLOW CREEK ASSOCIATES, LTD.
REF: A98000002472

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.

You failed to make the correction(s) requested in our previous letter.

The document must be signed by a current general partner, if any, and by each newly designated general partner(s).

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) 245-6051.

Jenna D Harris
Regulatory Specialist II

FAX Aud. #: H18000165865
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