

F070000001840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

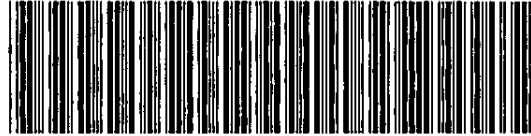
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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change

11/30/15--01047--003 **35.00

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15 NOV 30 PM 3:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 3 2015
A RAMSEY

2804 Gateway Oaks Drive #200 Sacramento, CA 95833

Phone (800)533-7272 Fax (800)603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

NUMBER PAGES:

Date: November 24, 2015

AE: Nia Johnson

TO: Florida Department of State

H1080

REFERENCE: 931580

PO Box 6327

Tallahassee, FL 32314

FAX:

PLEASE PERFORM THE FOLLOWING:

WM-BUILDERS DEVELOPMENT INC. DBA WM BUILDERS, INC.

Change of Registered Agent

IN: FL

SPECIAL INSTRUCTIONS: PLEASE REGULAR MAIL FILED COPY TO:

PARACORP INCORPORATED

ATTN: NIA JOHNSON

2804 GATEWAY OAKS DR. #200

SACRAMENTO, CA 95833

PLEASE RETURN: Regular Mail

PLEASE CALL (800)533-7272 ATTN: Nia Johnson TO CONFIRM FILING RESULTS

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #200 SACRAMENTO, CA 95833

**CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET
(800)533-7272**

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of California
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: WM Builders Development Inc.
2. The principal office address: 9948 Hibert Street Ste 210
San Diego CA 92131
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4-4-07 Document number: F07000061840

5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (If resigned, enter resigned)

RESIGNED

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

PARACORP INCORPORATED

155 OFFICE PLAZA DRIVE, 1ST FLOOR

P.O. Box NOT acceptable

TALLAHASSEE, FL 32301

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SECRETARY OF STATE

The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board, or the corporation has been notified in writing of the change.

Mark Schmidt
Signature of an officer or director

Mark Schmidt President
Printed or typed name and title

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 obligation of my position as registered
agent. Or, if this document is being filed merely to reflect a change in the registered office address, I
hereby confirm that the corporation has been notified in writing of this change.

Sharon Cooke
Signature of Registered Agent

11/24/2015

Date

If signing on behalf of an entity:

Sharon Cooke, Assistant Secretary

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314.