LO400QG040874

Bill & Denise Grimes 3901 Earle Ct. Kissimmee, Fl. 34746					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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SECRETARY OF STATE
TALLAHASS

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06/24/05--01045--008 **25.00

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited	l liability company	y is: WAG LL		 ,	
2. The mailing address of	the limited liabilit	ty company is:	3301 Earle C	Court,	
Kissimmee, FL 34746					
6/1/04	•	· · · · · · · · · · · · · · · · · · ·	L04000040	0824	
3. Date of filing/registration	on in Florida	-	4. Document	number	
5. The name of the register Florida Department of S	red agent and the retate:	egistered office	·	wn on the records of the	
		Name			
	3890	Turtle Creek D	r., Suite B-1		
		Address		• •	
Port Orange, FL 32127					
		City, State and Z	•	LCG 2005	
6. The name and address of the new registered agent and/or office:					
	W	illiam Grimes		24 SSE	
	330	Name 01 Earle Court		To Comment	
Florida street address (P.O. Box NOT acceptable)					
	Kissimmee	FI. 3474	16	02 0A	
•	Ci	ty, State and Zig)	• :	
and the business office of the liability company, it is here the members of the limited the operating agreement of Milliam A	ange or changes as the registered ager by confirmed that I liability company the limited liability.	re made, the Float will be identice the change(s) was otherwise try company.	rida street addı	of Florida, it is hereby ress of the registered office rease of a Florida limited rized by an affirmative vote of the articles of organization or	
(Signature of a member or authorize	ed representative of a m	nember)		-	
William Grimes					
(Printed or typed name of signee)					
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm to the confirm of Registered Agent)	atment as registers of all statutes relacept the obligation is document is be that the limited lia	ed agent and ag ative to the prop itions of my posi ing filed to mero bility company	ree to act in thi per and comple ition as register ely reflect a cho has been notific	is capacity. I further agree to te performance of my duties, red agent as provided for in unge in the registered office ed in writing of this change.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

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