

LD6000072844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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DIVISION OF CORPORATION
08 AUG 18 PM 12:02

G. MCLEOD

AUG 19 2008

EXAMINER

CF 25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 1, 2008

W. S. PROPERTIES, LLC.
12441 ADVENTURE DRIVE
RIVERVIEW, FL 33579 US

SUBJECT: W. S. PROPERTIES, LLC.
Ref. Number: L06000072844

Our records indicate the registered agent for the above named limited liability company resigned on June 25, 2008 and that the limited liability company currently does not have a registered agent designated.

Chapter 608, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a limited liability company for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named limited liability company 60 days from the date of this letter if a registered agent is not properly designated.

Please designate a new registered agent by doing one of the following: 1) complete the enclosed registered agent designation form, 2) file the current year annual report (if applicable) or 3) file an amended annual report (again, if applicable). **Each one of these filings must be submitted with the appropriate filing fee.**

If you should need any further information, please contact our office at (850) 245-6050.

Carol Mustain
Regulatory Specialist II
Division of Corporations

Letter Number: 208A00039292

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 liability company is: W.S. PROPERTIES, L.L.C.

2. The mailing address of the limited liability company is: 12441 ADVENTURE DR
RIVERVIEW, FL 33579

7/24/08
3. Date of filing/registration in Florida

LC06000072944
4. Document number

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

SCOTT WILLIAMS
Name
12441 ADVENTURE DR
Address
RIVERVIEW, FL 33579
City, State and Zip

6. The name and address of the new registered agent and/or office:

SAME
Name

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

FL

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Scott Williams

(Signature of a member or authorized representative of a member)

SCOTT WILLIAMS

(Printed or typed name of signer)

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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Scott Williams

(Signature of Registered Agent)

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

FILING FEE: \$25.00

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08 AUG 18 PM 12:02
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