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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone)
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S. HAWKES

MAY 1 5 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: WTW Services LLC (Name of	of Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Elizabeth S. McNeil (Name of Person)		
. (Maile of Folson)		
WTW Services LLC (Firm/Company)		
1500 Beville Road Suite 606-162	· · · · · · · · · · · · · · · · · · ·	
(Address)		
Daytona Beach, FL 32114		
(City/State and Zip Code)		
For further information concerning this matt	er, please call:	
Elizabeth S. McNeil	at (407) 733-5728	
(Name of Person)	(Area Code & Daytime Telephone Number)	
. STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following	ng amount:	
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	

INHS18 (5/08)

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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. Name of the limited liability company: WTW Servi	ces LLC
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 2111 Stockton Drive Sanford, FL 32771
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Same as above
4-26-09	L08000062175
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Elizabeth S. McNeil
Registered Office Address:	2111 Stockton Drive Sanford, FL 32771
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW Registered Agent</u> :	W Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1500 Beville Road Suite 606-162 Daytona Beach
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chareby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	et address of the registered office and the business case of a Florida limited liability company, it is
Elizabeth S. McNeil	_
(Printed or typed name of signee) I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position. F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified. (Signature of Registered Agent)	agree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00