## 111000063865

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## COVER LETTER

то:	Registration Section Division of Corporations				
WRD PROVIDENCE PALM HARBOR LLC					
3000		of Limited Liability Company			
Dear S	Sir or Madam:				
The cr	nclosed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.			
Please	return all correspondence concerning this	matter to the following:			
BRIA	N J. AUNGST, JR.				
•	Name of Person				
MAC	FARLANE FERGUSON & MCMUL	LEN			
	Firm/Company	<del></del>			•
625 (	COURT STREET, SUITE 200	<u> </u>	·	20	
<del></del>	Address	<del></del>	5	<b>≅</b>	ī
CLE	ARWATER, FL 33756		ا الراب	<del></del>	
	City/State and Zip Code		-( -: -:		11
bja@	)macfar.com		is.	i,3 Oz	7
Ī	E-mail address: (to be used for future annual report notification)				****
For fu	rther information concerning this matter,	please call:		•	
BRIA	.N J. AUNGST, JR.	727 441-8966	ı		
	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	amount:			
	☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

INH\$18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

I. N	ame of the limited liability company: WRD PROVI	IDENCE PALM HARBOR LLC
2. (a)	123 COULTER AVENUE	(b) 123 COULTER AVENUE
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited Hability company:  (Note: MAY BE POST OFFICE BOX)
	SUITE 200	SUITE 200
	ARDMORE, PA 19003	ARDMORE, PA 19003
	05/27/2011	L11000063865
<ol> <li>(a)</li> </ol>	Date of filing/registration in Florida JAMES N. POWELL	4. Document number
J. (a.	Registered Agent and Registered Office shown on the records of ONE PROGRESS PLAZA	fihe Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET) SUITE 1210	ADDRESS)
	ST. PETERSBURG	33701
(b)	BRIAN J. AUNGST, JR.  Enter name of NEW Registered Agent and/or NEW Registeres  MACFARLANE FERGUSON & MCMULLEI  NEW Registered Office Address:	SSEE C.
	625 COURT STREET, SUITE 200	S I A C
the chagent was/w	range or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	aws of the State of Florida, it is hereby confirmed that after of the registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in the limited liability company.
	142	BENJAMIN WILLNER
	ature of a member or authorized representative of a member	Printed or typed name of signce
provis the ob- to mei notific	eby accept the appointment as registered agent and agesions of all statutes relative to the proper and complete sligations of my position as registered agent as provide rely reflect a change in the registered office address, I sed in writing of this change.	gree to act in this capacity. I further agree to comply with the e performance of my duties, and I am familiar with and accept led for in Chapter 605, F.S. Or, if this document is being filed I hereby confirm that the limited liability company has been