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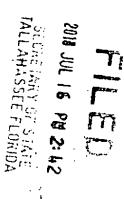
(Requestor's Name)					
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COVER LETTER

	Registration Section Division of Corporations								
SUBJE	WRDC ENTERPRISE III LL	С							
CODGE		Name of Limited Liability Company							
Dear Sir	or Madam:								
The enc	losed Registered Agent/Registered Off	ice Change and	d fee(s) are submitted for filing.						
Please r	eturn all correspondence concerning th	is matter to the	: following:						
BRIAN	J. AUNGST, JR.								
	Name of Person								
MACF	ARLANE FERGUSON & MCMU	LLEN							
	Firm/Company								
625 C	OURT STREET, SUITE 200								
	Address		_	57					
CLEA	RWATER, FL 33756			ALLA Sicilia					
	City/State and Zip Code			HASS					
bja@r	macfar.com			SHOW THE PROPERTY OF THE PROPE					
E-	mail address: (to be used for future and	nual report not	fication)	TES 2 II					
For furt	her information concerning this matter.	please call;							
BRIAN	J. AUNGST, JR.	727 at (441-8966	10					
	Name of Person		Area Code & Daytime Telephi	one Number					
Registration Section R Division of Corporations D Clifton Building P.		egistration Section fivision of Corporations O. Box 6327 allahassee, Florida 32314							
	Enclosed is a check for the following	g amount:							
	2 \$25 Filing Fee	<u>a</u> :	\$55 Filing Fee & Certified Copy						
INHS18	(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.

	25 DOCKSIDE LANE		RPRISE III LLC (L) 123 COULTER AVENUE			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	(b) Mailing uddress of limited liability company: (Note: MAY BE POST OFFICE BOX) SUITE 200			
	PMB 462					
	KEY LARGO, FL 33037	ARDMORE, PA 19003				
	12/23/2011	Ĺ	_1100014	1 3592		
3.5. (a)	Date of filing/registration in Florida EVAN D. SEIF	4.		Document number		
(b)	Registered Agent and Registered Office shown on the records of the 2800 PONCE DE LEON BLVD.	he Florida (Dept. of State	• ::		
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)		201 JAL		
	MIAMI .FL	33134		2010 JUL Sacrata Allaha		
	BRIAN J. AUNGST, JR.			ASSEN		
	Enter name of NEW Registered Agent and/or NEW Registered	Office add	<u>(677</u> :			
	MACFARLANE FERGUSON & MCMULLEN	I		STALL STALL		
	NEW Registered Office Address:			IDA IDA		
	625 COURT STREET, SUITE 200					
	CLEARWATER, FL	33756				
the cha agent v	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regist ability cor If the limi	ered office npany, it is ted liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in		
	(bruch /	CHU	JCK LOJ	EWSKI		
-	ture of a member or authorized representative of a member			Printed or typed name of signee		
provisi the obl to mere	by accept the appointment as registered agent and agrins of all statutes relative to the proper and complete igations of my position as registered agent as provided ly reflect a change in the registered office address, I fail in writing of this change.	ee to act t performa I for in Ci tereby con	in this cape nce of my e hapter 605 nfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept. F.S. Or, if this document is being filed the limited liability company has been		

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

Signature of Registered Agent