## 1120000075191

| (Requestor's Name)                      |              |           |  |  |  |
|---|--------------|-----------|--|--|--|
| (Address)                               |              |           |  |  |  |
| (Address)                               |              |           |  |  |  |
| (City/State/Zip/Phone #)                |              |           |  |  |  |
| PICK-UP                                 | MAIT         | MAIL      |  |  |  |
| (Business Entity Name)                  |              |           |  |  |  |
| (Document Number)                       |              |           |  |  |  |
| Certified Copies                        | Certificates | of Status |  |  |  |
| Special Instructions to Filing Officer: |              |           |  |  |  |
|   |              |           |  |  |  |
|   |              |           |  |  |  |
|   |              |           |  |  |  |

Office Use Only



000335233660

10 DCT -2 XHII: 03

FILED

19 (CT -2 MH) 0

0.8%th

OCT - 3 2019

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 916984 7889471

AUTHORIZATION : Spelle man

COST LIMIT : \$ 25.00

ORDER DATE: September 13, 2019

ORDER TIME : 2:21 PM

ORDER NO. : 916984-001

CUSTOMER NO: 7889471

## CHANGE OF AGENT

NAME: WIE & INVESTMENT GROUP, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER:

## 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.

| 1.                        | Na   | me of the limited liability company: WIE & INVE   | STMENT  | GROUP, I  | LLC   |
|---------------------------|--|---|---|---|---|
| 2                         | (a)  | 14311 Biscayne Blvd #610874   | <b>(b)</b>  | PO Box  | 610874  |
|                           | (-)  | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  | (8)   |   | lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)                                      |
|                           |  | Miami, FL 33261   | <del></del>   | Miami, FL   | . 33261   |
|                           |  | 06/06/2012  |   | L1200007  | 5191  |
| 3.                        |  | Date of filing/registration in Florida  | 4.  | <u>-</u>  | Document number   |
| 5.                        | (a)  | Berthony Gilles   |   |   |   |
|                           | ` ,  | Registered Agent and Registered Office shown on the records of  | of the Florida  | Dept. of State:   |   |
|                           |  | 1201 Hays Street  |   |   |   |
|                           | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) |   |   |   |   |
|                           | (b)  | Corporation Service Company   | L 32301   |   | NEO PEO   |
|                           |  | Enter name of NEW Registered Agent and/or NEW Registers  1201 Hays Street   | o Ornce agg   | <b>LGAS</b> :   |   |
|                           |  | NEW Registered Office Address:  |   |   |   |
|                           |  | Tallahassee , F   | ղ_ <u>3230</u> 1  |   |   |
| the<br>age<br>wa<br>the   | chai<br>int w<br>s/we<br>artic                             | mited liability company is not organized under the lange or changes are made, the Florida street address call be identical. Or, in the case of a Florida limited is reauthorized by an affirmative vote of the members cles of organization or the operating agreement of the united is a member or authorized representative of a member | of the regist<br>liability con<br>of the limit<br>e limited lia | ered office opany, it is ted liability ability compony Gilles | and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in |
| I h<br>pro<br>the<br>to i | ereb<br>visio<br>obli<br>nere                              | y accept the appointment as registered agent and as ons of all statutes relative to the proper and complet gations of my position as registered agent as providly reflect a change in the registered office address, I ip writing of this change.   | gree to act i<br>e performa<br>led for in Cl<br>l hereby coi    | n this capa<br>nce of my di<br>hapter 605,<br>girm that th    | city. I further garge to symply with the  |
| Sig                       | natur  | c of Registered Agent Corporation Service Company   | BY:   |   | ce President  |

100