

10/26/2020

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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LLC REGISTERED AGENT CHANGE
BW PROPERTY MANAGEMENT, LLC

Certificate of Status	0
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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 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. Name of the limited liability company: BW PROPERTY MANAGEMENT, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

435 L'Ambience Drive, #L-607

Longboat Key, FL 34228-3927

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

435 L'Ambience Drive, #L-607

Longboat Key, FL 34228-3927

11/21/2012

L12000146996

3. Date of filing/registration in Florida 4. Document number

5. (a) Blair Wolfson

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

435 L'Ambience Drive, #L-607

Longboat Key, FL 34228-3927

(b) Fremajane Wolfson

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:

435 L'Ambience Drive, Unit 607

Longboat Key, FL 34228

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.

Fremajane Wolfson
Signature of a member or authorized representative of a member

Fremajane Wolfson
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 605, 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.

Fremajane Wolfson
Signature of Registered Agent

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

FAX COVER SHEET

TO

COMPANY

FAX NUMBER 18506176383

FROM Kimberly Laughrey

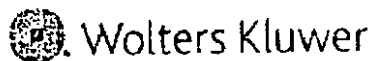
DATE 2020-10-26 16:46:53 CST

RE WOLFSON PROPERTY MANAGEMENT LLC 13325662

COVER MESSAGE

Tori Wolfe
Fulfillment Associate
Fulfillment Operations
CT Corporation

Team (614) 280-3338
GlobalFulfillmentTeam@wolterskluwer.com



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