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COVER LETTER

Division of Corporations	
WOODROSE EQUITIES, LLC	
Name of Limited Liability Company	
Dear Sir or Madam:	
The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Elizabeth M. Jones	
Name of Person	
Shutts & Bowen LLP	
Firm/Company	
525 Okeechobee Blvd., Suite 1100	: 1
Address	
West Palm Beach, FL 33401	. 5
City/State and Zip Code	,
EJones@shutts.com	
E-mail address: (to be used for future annual report notification)	· F 8
For further information concerning this matter, please call:	
Elizabeth M. Jones 561 671-6814	·
Name of Person Area Code Daytime Telephone Number	er

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

AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following: FIRST: The name of the limited liability company is: WOODROSE EQUITIES, LLC SECOND: The Florida document number of the limited liability company is: L14000001112 . THIRD: The street address of the limited liability company's principal office is: 3140 S. Ocean Boulevard, #205N Palm Beach, FL 33480 The mailing address of the limited liability company's principal office is: 3140 S. Ocean Boulevard, #205N Palm Beach, FL 33480 FOURTH: The date the Statement of Authority became effective is: March 24, 2014 The statement of authority is cancelled. FIFTH: Rikki Lober Bagatell Signature of authorized representative Typed or printed name of signature Filing Fee: \$25.00 Certified Copy: \$30.00 (optional) CR2E145 (2/14)