## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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

From:

Account Name : LEGALZOOM.COM INC.
Account Number : J20010000062
Phone : (323)952-8600
Fax Number : (323)962-3889

\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please Email Address:

WIE INTERNATIONAL, LLC Certificate of Status O Certified Copy 1 Page Count 02 Estimated Charge \$55.00

LLC REGISTERED AGENT CHANGE

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Pursuant to the provisions of sections 605.0114, Florida Statutes, the undersigned limited liability

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

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: WIE INTERNATIONAL, LLC 2. (a) Principal office address of limited liability company: 1830 N ATLANTIC AVE (Note: MUST BE STREET ADDRESS) COCOA BEACH, FL 32931 1830 N ATLANTIC AVE. C502 (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) COCOA BEACH, FL 32931 20 L14000128543 08/15/2014 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: PALMER, TOM Registered Agent: Registered Office Address: 1830 N ATLANTIC AVE. C502 COCOA BEACH, FL 32931 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: United States Corporation Agents, Inc. **NEW** Registered Agent: 13302 Winding Oaks Court Suite A **NEW** Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) Tampa FL 33612 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. Ur, 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. Signature of a member or authorized representative of a member Thomas M Palmer Printed or typed name of signee 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.

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

INHS18 (12/13)

Signature of Registered Agent