L15000179898

(Requestor's Name)
(Address)
(,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(====,,
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Special instructions to Filing Officer.

Office Use Only



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10/28/19--01034--026 **25.00



NOV 21 2019 S. YOUNG



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobal.com

Date: October 24, 2019

Order#: 020929/010

Re: WPCM MADISON, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Meghan Groom c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.

	7 E CONGRESS STREET SUITE 900A	(b)	7	7 E CONGRESS STREET SUITE 900A	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability compa (Note: MAY BE POST OFFICE BOX	-
	SAVANNAH, GA 31401		SA	AVANNAH, GA 31401	
	10/21/2015		L15	5000179898	
	Date of filing/registration in Florida	4.		Document number	
(a)	GRAGG, K. LAWRENCE				
(4)	Registered Agent and Registered Office shown on the records of	the Florida	Dept.	or, of State:	
	2020 SALZEDO STREET 5TH FLOOR				
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)			
				- 70	
	CORAL GABLES, FI.	33134			
1	Corporation Sanisa Company			<u>:</u>	•
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered		-,		
				To the state of th	
	1201 Hays Street				
	NEW Registered Office Address:				
	Tallahassee , FL	32301			
					
ie li cha	imited liability company is not organized under the lay nge or changes are made, the Florida street address of	vs of the ! the regis:	State	e of Florida, it is hereby confirmed that a d office and the business office of the re-	ilter zistere
nt w	vill be identical. Or, in the case of a Florida limited lia	ability cor	npan	any, it is hereby confirmed that the chang	e(s)
/we arti	ere authorized by an affirmative vote of the members colles of organization or the operating agreement of the	of the fimi Timited li	ted li abilit	Trability company or as otherwise provid lity company.	ed m
	Jul & GOME			i. Authorized Person	
gnat	ure of a member or authorized representative of a member	3111 0	1104111.	Printed or typed name of signee	
	by accept the appointment as registered agent and agr	ree to act	in thi	his capacity. I further agree to comply we of my duties, and I am familiar with ana ster 605, F.S. Or, if this document is bein that the limited liability company has a	ith th