L16000216443

(Requestor's Name)									
(Ad	dress)								
(Ad	dress)								
(City/State/Zip/Phone #)									
PICK-UP	MAIT	MAIL							
(Business Entity Name)									
(Document Number)									
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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#: 020929/004

Re: WPCM CLEVELAND, 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.

1,	Na	me of the limited liability company: WPCM CLEVELAN	ND, LL	<u> </u>				
2. (a)		7 E CONGRESS STREET SUITE 900A Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	7 E CONGRESS STREET SUITE 900A Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		SAVANNAH, GA 31401		SAVANN	AH, GA 31401			. -
_		11/30/2016	<u> </u>	L1600021				
3.		Date of filing/registration in Florida	4.		Document number			
5. (a)	(a)	GRAGG, K. LAWRENCE						
		Registered Agent and Registered Office shown on the records of the	Florida I	Dept. of State:	:		مہ	
		2020 SALZEDO STREET, 5TH FLOOR					- ,	
		Registered Office Address (MUST BE FLORIDA STREET ADI	<u>DRESS)</u>			-	3	1
			<u>.</u> .					•
		CORAL GABLES . FL. 3	33134				 	J
	t_	Corporation Soning Company					Ģ	
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Off	fice addr	ess:		•	-	
			•					
		1201 Hays Street						
		NEW Registered Office Address:						
		Tallahassee . F1, 3	32301					
the cager was/ the a	cha: it w we irtic	mited liability company is not organized under the laws onge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of the list of organization or the operating agreement of the limited liability.	e registe lity con ne limit nited lia	ered office npany, it is ed liability ability com lmi, Author	and the business of hereby confirmed to company or as other pany. ized Person	fice of hat the erwise	the reg change provide	istered (s)
I he prov the o to m notij	reb visio obli ere lieq	vaccept the appointment as registered agent and agree of a member of all statutes relative to the proper and complete per gations of my position as registered agent as provided for the proper of the provided for the provided for the provided for the provided for the provided of the provid	rforman or in Cl eby con	n this capa ice of my d iapter 605, ifirm that ti	Printed or typed name control of further agreed laties, and I am fam. F.S. Or, if this doche limited liability copy, Asst. Vice Pres	e to co iliar w ument compai	mply wi ith and is being ny has b	th the accept g filed een