## 117000139223

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							





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19 MAY 20 MM 9-21

SECHEMENT OF STATE

JUN 0 4 2010 T 80%ROEDER

## **COVER LETTER**

Division of Cor	porations							
SUBJECT: WP 230	WP 2301 Southend L.L.C.							
	Name of Limited Liability Company							
Dear Sir or Madam:								
The enclosed Registered	d Agent/Registered Office Chang	ge and fee	(s) are submitted for filing.					
Please return all corresp	ondence concerning this matter	to the follo	owing:					
Larry Grogan								
	Name of Person							
Worvan Partners LL	.C							
	Firm/Company							
1811 Corporate Driv	√e							
	Address							
Boynton Beach, FL	33426							
Cit	y/State and Zip Code							
larry.grogan@worva	·							
E-mail address. (to	o be used for future annual repor	t notificat	ion)					
For further information	concerning this matter, please ca	all:						
Larry Grogan		S1)	866-7727					
Name o	of Person	A	rea Code & Daytime Telephone Number					
STREET/COL Registration Se Division of Cor Clifton Building 2661 Executive Tallahassee, Flo	porations g Center Circle	Regist. Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314					
Enclosed is a check for the following amount:								
■ \$25 Filing Fe	ee	□ \$55 F	iling Fee & Certified Copy					

TO: Registration Section

## 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	ame of the limited liability company: WP Southend	L.L.(	). 	1000 01				
2. (a)	Principal office address of limited liability company.  (Note: MUST BE STREET ADDRESS)				Cleveland Avenue  Mailing address of limited liability company:  (Note: M-1) BE POST OFFICE BOX			
	Charlotte NC 28203	_		Charlotte	NC 28203	3		
	January 16, 2019			L17000139223				
3. 5. (a)	Date of filing/registration in Florida Worvan Partners	4.			Document nu	mber	•	
. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 6530 West Rogers Circle  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  Suite 33			:	SEUNE N FALL APA	19 MAY 20	<u> </u>	
(b)	Boca Raton					O AM SPET FY OF STATE SSEEL FLORIDA		E
	1811 Corporate Drive  NEW Registered Office Address:							
	Boynton Beach FL	3342	:6					
the chagent was/w	limited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liverer authorized by an affirmative yote of the members of the organization or the operating agreement of the	the reability of the limite	gist coi imi d li	ered office upany, it is ted liability	e and the busing the hereby configure or a company or a pany.  Grogan	ness office rmed the as other	ce of t it the d wise p	he registered change(s)
Ishere provis the ob to men notific	addie of a member or authorized fepresentative of a member seby accept the appointment as registered agent and agrations of all standes relative to the proper and complete ingations of proposition as registered agent as provide rely reflect a change in the fegistered office address. It is a provide the first riting of this analyse.	ree to a perfor d för ii hereby	act rma n C r co	in this cap nce of my hapter 605 nfirm that	Primed or types acity. I furthe duties, and I a i. F.S. Or, if t the limited ha		-	nply with the h and accept s being filed v has been

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