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(Requestor's Name)			
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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#: 020929/005

Re: WPCM DANIEL ISLAND, 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. N	ame of the limited liability company: WPCM DANIE	L ISLAND,	LLC
2 (a)	7 East Congress Street Suite 900A	(b)	7 East Congress Street Suite 900A
2. (0)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Savannah, GA 31401	<u> </u>	Savannah, GA 31401
	11/09/2018		L17000226337
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records o 2020 SALZEDO ST 5TH FLOOR Registered Office Address (MUST BE FLORIDA STREET)		Dept. of State:
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registere 1201 Hays Street NEW Registered Office Address:	d Office addr	_ .
	Tallahassee . FI	1, 32301_	
the chagent was/w the art Signa I here provis the obto mer	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the nure of member or authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and complete lightions of my position as registered agent as provided by reflect a change in the registered office address. It is in writing of this change	of the registe iability con of the limited lia <u>Jill Cil</u>	ered office and the business office of the registered apany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in bility company. mi, Authorized Person Printed or typed name of signee a this capacity. I further agree to comply with the accept apter 605, F.S. Or, if this document is being filed