L19000158787

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COVER LETTER

TO: Registration Section : Division of Corporations						
WD 19790 Funding, LLC						
SUBJECT: Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this ma						
Bruno Bloch						
Name of Person						
WD 19790 Funding, LLC						
Firm/Company	.					
20161 NE 16th Place						
Address						
Miami, FL, 33179						
City/State and Zip Code	· ···· ·					
bruno@mulcowatches.com						
E-mail address: (to be used for future annual	report notification)					
For further information concerning this matter, plea	ase call:					
Bruno Bloch	786 469-9306					
Name of Person	Area Code & Daytime Telephone Number					
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Enclosed is a check for the following am	ount:					
■ \$25 Filing Fee	S55 Filing Fee & Certified Copy					
INHS18 (2/14)						

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.

ı. Na	ame of the limited liability company: WD 19790 Fund	ding, LL	С	
2. (a)	20161 NE 16th Place		(b) 201	161 NE 16th Place
2. (u)	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)
	Miami, FL, 33179		Mia	ami, FL, 33179
				
	06/25/2019		L1900	000158787
3.	Date of filing/registration in Florida	4.	•	Document number
5. (a)	Corporate Maintenance Services, LLC			
()	Registered Agent and Registered Office shown on the records of	of the Flo	rida Dept.	t. of State:
	1000 Brickle Ave. Ste 400			
	Registered Office Address (MUST BE FLORIDA STREE	T ADDR	ESS)	
	Miami	3313		
	,	r L		
(b)	Stemina Management, LLC			
(0)	Enter name of NEW Registered Agent and/or NEW Register	ed Office	address:	
	00141315144151			, , , , , , , , , , , , , , , , , , ,
	20161 NE 16th Place			· :
	NEW Registered Office Address:			-
		2217		
	Miami	FL	, 	_
change agent v was/we	imited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative your of the members icles of organization or the obstating agreement of the	he regist liability s of the ne limite	ered off compan limited l	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
Signa	ture of a member or authorized representative of a member	-		Printed or typed name of signee
provisi the obi to mer notified	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provide elv reflect a change in the registered office address, d in writing of this change.	gree to te perfo led for i I hereby	act in thi rmance c n Chapti r confirn	is capacity. I further agree to comply with the of my duties, and I am familiar with and accep ter 605, F.S. Or, if this document is being filed m that the limited liability company has been

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

INHS18 (2/14)