122000348581

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2022 SEP 15 PN 2: 09

DEC 20 2021 S. PHATHL

COVER LETTER

TO: Registration Section Division of Corporations					
WG777888, LLC SUBJECT:					
	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter	to the following:				
WOODY MCLANE					
Name of Person	<u>.</u>				
Firm/Company					
4815 NW 50 ST					
Address					
TAMARAC, FL 33319					
City/State and Zip Code					
WOODYMCLANE@YAHOO.COM					
E-mail address: (to be used for future annual repo	ort notification)				
For further information concerning this matter, please of	call:				
WOODY MCLANE at (954-806-6211)				
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 amount	t:				
■ \$25 Filing Fee	☐ \$55 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.

l. Na	me of the limited liability company: WG777888, LLC	· -				
2. (a)			(b)			
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited (Note: MAY BE POST	· ·	
	1515 SE 17 ST., SUITE A-111		1515 SE	17 ST., SUITE A-111		
	FORT LAUDERDALE, FL 33316		FORT LAUDERDALE, FL 33316 L220000348581			
	AUGUST 8, 2022					
3.	Date of filing/registration in Florida	- 4.	 _	Document number		
5. (a)	WENFANG WANG					
, (a)	Registered Agent and Registered Office shown on the records of	the Flo	rida Dept. of St	ate;		
	1535 SE 17 ST., SUITE A-111, FORT LAUDERDALE,	FL 333	16			~2
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_		2022
					.;	SEP 15
						
	,FI			<u> </u>	Ţ.) Pil
(b)					Ξ.	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	l Office	address:	_	£7.7 1	2: 09
					÷ ,	ဌာ
	NEW Registered Office Address:					
	1515 SE 17 ST., SUITE A-111					
	1919 9E 17 91., 3011E A-111			_		
	FORT LAUDERDALE , FI	33316	ı			
:hange igent v vas/we	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of the organization or the operating agreement of the	ws of t regist ability of the l	he State of F ered office a company, it imited liabil	nd the business office of is hereby confirmed that ity company or as other	of the regi	stered nge(s)
	Ventans Wans	//	/ENFANG W			
	ture of a number or authorized representative of a member			Printed or typed name of	•	•
provisi he obl o mere	by accept the appointmential registered agent and ago ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I I in writing of this change.	ree to o perfor d for it hereby	nct in this cap mance of my n Chapter 60 confirm that	pacity. I further agree is duties, and I am famili 55, F.S. Or, if this docu 15 the limited liability co	to comply ar with a ment is b mpany ha	with the md accept cing filed as been
- h	en/ang Wans					
Signatu	re of Registered Agent					

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