Florida Department of State Division of Corporations ectromic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE W5HOUSING LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

DEC 1 4 2023

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.

. Na	ame of the limited liability company: W5Housing LLC		
. (a)	7001 10th Street South	a	(b)
. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	St Petersburg "Florida (US)33705		
	11/7/2022 12:00:00 AM		1.22(00)478278
	Date of filing/registration in Florida	4.	Document number
(a)	LEGALING CORPORATE SERVICES INC.		
. ()	Registered Agent and Registered Office shown on the records of 476 Riverside Ave.	the Florid	la Dept. of State;
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES.	55)
	Jacksonville, FL	32202	
	rL		
(b)	Corporate Creations Network Inc.		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	ddress:
	801 US Highway 1		<u></u>
	NEW Registered Office Address:		
	North Palm Beach	33408	
	North Palm Beach , FL	·	
hange gent w vas/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registerobility confidence	red office and the business office of the registered ompany, it is hereby confirmed that the change(s) mited liability company or as otherwise provided in
			nielle W. Gossman, Special Manager
_	ture of a member or authorized representative of a member		Printed or typed name of signee
herel rovisi he obl mere	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete jigations of my position as registered agent as provided by reflect a change in the registered office address, I have the property of this change.	ee to act perform I for in G tereby c	t in this capacity. I further agree to comply with the vance of my duties, and I am familiar with and accep Chapter 605, F.S. Or, if this document is being filed confirm that the limited liability company has been
опрес	Danielle G	ossmar	n, Special Secretary
Signatu	re of Registered Agent		