

L23000402134

VIEW

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

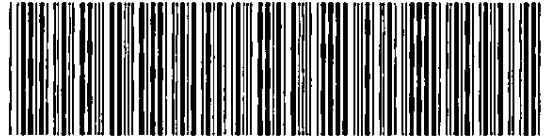
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100419805731

12/13/23--01018--008 **25.00

FILED

2023 DEC 13 PM 5:07

SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WHP MANAGEMENT, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Valentina Lugo

Name of Person

Firm/Company

1007 N Orange St. 4th Floor Suite #1050

Address

Wilmington Delaware 19801

City/State and Zip Code

agent@firstbase.io

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Valentina Lugo

Name of Person

at () 9293050668

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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. Name of the limited liability company: WHP MANAGEMENT, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

6272 LAKE OSPREY DRIVE
LAKEWOOD RANCH, FL 34202

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

6272 LAKE OSPREY DRIVE
LAKEWOOD RANCH, FL 34202

08/28/2023

L23000402134

3. Date of filing/registration in Florida 4. Document number

5. (a) BORSHEIM, KIMBERLY L
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
4826 14TH AVENUE EAST

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

BRADENTON, FL 34208

(b) Firstbase Agent LLC

Enter name of NEW Registered Agent and/or NEW Registered Office address:

111 NE 1st St, 8th Floor Suite #88592

NEW Registered Office Address:

Miami, FL 33132

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Valentina Lugo

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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

FILED
2023 DEC 13 PM 5:06
SECRETARY OF STATE
TALLAHASSEE, FL