(1)08/16/12 21003 Page 1 of 1 Division of Corporat Florida Department of State Division of Corporations Electronic Filing Cover Sheet Note: Please print this page and use it as a cover sheet. Type the fax audit num (shown below) on the top and bottom of all pages of the document. (((H120002067073))) H120002067073ABCZ Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850)617-6383 次 四 From: \bigcirc Account Name : WINDERWEEDLE, HAINES, WARD & WOODMAN Account Number : 076077002775 Phone : (407)246-8678 N H C Fax Number : (407)423-7014 r o **Enter the email address for this business entity to be used for miture annual report mailings. Enter only one email address please.** Email Address: LLC REGISTERED AGENT CHANGE WCD ORTEGA ARMS, L.L.C. Certificate of Status 0 Certified Copy 0 Page Count 01 \$25.00 Estimated Charge Help J. BRYAN Electronic Filing Menu Corporate Filing Menu AUG 1 2012 EXAMME

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STATEMENT OF CHANGE OF REGISTERED OF BOTH FOR LIMITED LIABILITY COMPANY	ICE OR REGISTERED AGENT OR
Pursuant to the provisions of sections 608.416 or 608. liability company submits the following statement in or agent, or both, in the State of Florida.	508, Florida Statutes, the undersigned limited der to change its registered office or registered
	CD ORTEGA ARMS. LL.C.
2. (a) Principal office address of limited liability compa	ny:
(Note: MUST BE STREET ADDRESS)	1350 Orange Avenue, Suite 100 Winter Park, Florida 32789
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	
12/29/1999	L9900009338
3. Date of filing/registration in FlorIda	4. Document number
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:
Registered Agent:	WILLIAM C. DEMETREE FAMILY OFF
Registered Office Address:	1350 ORANGE AVENUE SUITE 100 WINTER PARK, FL 32789
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	W Registered Office address:
NEW Registered Agent:	WHWW, INC.
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	390 N. ORANGE AVENUE. SUITE 1500 ORLANDO FL 32801 .FL
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide. liability company, it is bereby confirmed that the change of the members of the limited liability company or as oth or the observating agreement of the limited liability company signature of amember or subhorized representative of a member	a laws of the State of Florida, it is hereby Florida street address of the registered office stical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote revise provided in the actions of complication
MARY L. DEMETREE, MANAGER	_
Printed or typed name of signee	agree to act in this capacity. I further agree to
Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability compar	roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office ny has been notified in writing of this change.
Printed or typed name of signee	roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office ny has been notified in writing of this change.