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S. HAWKES

MAY 17 2010

**EXAMINER** 



COMPORATION SERVICE COMPANY ACCOUNT NO. : 12000000195

REFERENCE : 382901 7775081

AUTHORIZATION : Lines &

	COOK LIVER OF THE PARTY OF THE
	COST LIMIT : \$\sqrt{2}\sqrt{3}\dots00
ORDER DATE :	May 13, 2010
ORDER TIME :	9:51 AM
ORDER NO. :	382901-173
CUSTOMER NO:	7775081
	CHANGE OF AGENT

WMP BOYNTON BEACH MANAGEMENT, NAME: LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XXX PLAIN STAMPED COPY

CONTACT PERSON: Matthew Young

EXAMINER'S INITIALS:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: WMP BOYN	ITON BEACH MANAGEMENT, LLC
. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)		ny: One Seagate, Suite 1500 Toledo, OH 43604
(b) Mailing address (Note: MAY B)	of limited liability company: E POST OFFICE BOX)	One Seagate, Suite 1500
April 25, 2007		M07000002378
3. Date of filing/registra	ation in Florida	4. Document number
5. (a) Registered Ager	nt and Registered Office shown or	the records of the Florida Dept. of State:
Registered Agen	ıt:	C T Corporation System
Registered Offic	e Address:	1200 South Pine Island Road Plantation, FL 33324
(b) Enter name of <u>N</u>	EW Registered Agent and/or NE	
<u><b>NEW</b></u> Registered	d Agent:	Corporation Service Company
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		1201 Hays Street
		Tallahassee ,FL 32301
that after the change or office of the registered a hereby confirmed that the liability company or as of limited liability company.  (Signature of a member or authority company)	changes are made, the Florida stream to the provided stream to the change (s) was/were authorized otherwise provided in the articles of a member)	e laws of the State of Florida, it is hereby confirmed the address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited of organization or the operating agreement of the
Blanca Lozada, Autl (Printed or typed name of signe	norized Person	
I hereby accept the app comply with the provision am familiar with and acc F.S. Or, if this documer confirm that the limited corporation Serv By:		agree to act in this capacity. I further agree to roper and complete performance of my duties, and I in as registered agent as provided for in Chapter 608, i change in the registered office address, I hereby ed in writing of this change.

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