

M16000003424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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300286042513

M14-3424

Amend

300286042513
05/23/16--01046--015 **55.00

CC

FILED
16 MAY 23 AM 10:27
CLERK OF STATE
TALLAHASSEE, FLORIDA

MAY 31 2016
N. CAUSSEAU



STINSON
LEONARD
STREET

Gail E. Partlow
612.335.1636 **DIRECT**
612.335.1657 **DIRECT FAX**
gail.partlow@stinson.com

May 16, 2016

Florida Department of State
Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: WMD Asset Management, LLC
Our File No. 2066525-0001

Dear Sir/Madam:

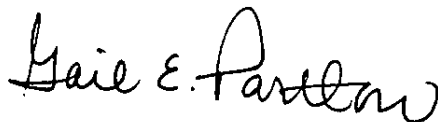
Enclosed for filing is an Application by Foreign Limited Liability Company to File Amendment to Certificate of Authority to Transact Business in Florida for WMD Asset Management, LLC. Also enclosed is a good standing certificate from the Delaware Secretary of State.

Please file the Amendment and prepare one certified copy. A check in the amount of \$55.00 is enclosed to cover your fees. Please return the certified copy to the undersigned in the self-addressed envelope provided.

Thank you.

Sincerely,

Stinson Leonard Street LLP



Gail E. Partlow
Paralegal

/gep

Encs.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WMD Asset Management, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gail Partlow

Name of Person

Stinson Leonard Street LLP

Firm/Company

150 South 5th Street, Suite 2300

Address

Minneapolis, MN 55402

City/State and Zip Code

gail.partlow@stinson.com

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

For further information concerning this matter, please call:

Gail Partlow

Name of Person

at (612) 335-1636

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

☐ \$30 Filing Fee &
Certificate of Status

☒ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: WMD Asset Management, LLC

Enter new principal office address, if applicable: 814 A1A N

(Principal office address

MUST BE A STREET ADDRESS)

Suite #101

Ponte Vedra Beach, FL 32082

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

814 A1A N

Suite # 101

Ponte Vedra Beach, FL 32082

2. The Florida document number of this limited liability company is: M14000003424

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 05/13/2014

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: 814 A1A N, Suite 101

Enter Florida Street Address

Ponte Vedra Beach, Florida 32082

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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.

If Changing Registered Agent, Signature of New Registered Agent

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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Address for William Daugherty and Dennis Carlton has changed to 814 A1A N, Ste #101, Ponte Vedra Beach, FL 32082

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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CEOM	Daugherty, William M.	814 A1A N, Ste #101, Ponte Vedra Beach, FL 32082	<input type="checkbox"/> Add
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6279 Dupont Station Ct, Jacksonville, FL 32217 Remove

MDS Carlton, Dennis E. 814 A1A N, Ste #101, Ponte Vedra Beach, FL 32082  Add

6279 Dupont Station Ct, Jacksonville, FL 32217 ☐ Remove

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 ADD
 REMOVE
 OF STATE
 FLORIDA
 ID

☐ Remove

☐ Add☐ Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the
aforementioned amendment(s), duly authenticated by the official having custody of records in the
jurisdiction under the law of which this entity is organized.

Signature of the authorized representative

William M. Daugherty, CEO

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WMD ASSET MANAGEMENT, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WMD ASSET MANAGEMENT, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF FEBRUARY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

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TALLAHASSEE, FLORIDA



4508365 8300

SR# 20163257526

You may verify this certificate online at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State

Authentication: 202325868

Date: 05-16-16