

Division of Corporations

**MH4000003471**

Page 1 of 1

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)222-1092  
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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA 32399-0001

**LLC REGISTERED AGENT CHANGE  
WASHINGTON PRIME MANAGEMENT ASSOCIATES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
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**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: WASHINGTON PRIME MANAGEMENT ASSOCIATES, LLC

2. (a) WISCONSIN TOWERS AT BETHESDA CROSSING  
Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*  
7315 WISCONSIN AVE, STE. 500-E  
BETHESDA, MD 20814

(b) WISCONSIN TOWERS AT BETHESDA CROSSING  
Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*  
7315 WISCONSIN AVE, STE. 500-E  
BETHESDA, MD 20814

3. 05/20/2014 Date of filing/registration in Florida

4. M14000003471 Document number

5. (a) CORPORATION SERVICE COMPANY  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
1201 HAYS STREET

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
TALLAHASSEE, FL 32301-2525

(b) C T Corporation System  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
NEW Registered Office Address:  
1200 South Pine Island Road  
Plantation, FL 33324

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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.

Jennifer Kurz  
Signature of a member or authorized representative of a member Printed or typed name of signee

*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.*

By: Samantha Jones  
Signature of Registered Agent  
Samantha Jones, Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
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