

M16 000002064

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

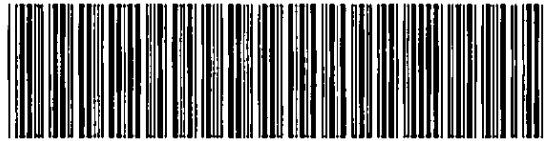
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700358074227

01/25/21--01020--017 **25.00

2021 JAN 25 PM 2:05

O SIMMONS
FEB 25 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wintergreen Properties, 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:

Barry N. Voorn

Name of Person

Wintergreen Properties, LLC

Firm/Company

19001 Old LaGrange Road, Suite 300

Address

Mokena, Illinois 60448

City/State and Zip Code

bvoorn@voornlaw.com

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

For further information concerning this matter, please call:

Barry N. Voorn

708 326-4210
at ()

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Wintergreen Properties, LLC

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

19001 Old LaGrange Road, Suite 300

Mokena, Illinois 60448

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

19001 Old LaGrange Road, Suite 300

Mokena, Illinois 60448

March 10, 2016

M16000002064

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Marc de la Cal

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1313 Ponce de Leon Blvd., #200

Coral Gables, FL 33134

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

InCorp Services, Inc.

NEW Registered Office Address:

17888 67th Court North

Loxahatchee, FL 33470

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.

Barry N. Voorn

Barry N. Voorn

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.

Desiree Miller

Desiree Miller on behalf of InCorp Services, Inc.

Signature of Registered Agent