## M1600000 9642

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
. (Business Entity Name)				
(Document Number)				
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SECRETARY SECRETORINA

ALLAHASSEE FLORINA



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De\_19808\_\_\_

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: March 5, 2019

Order#: 652936-005

Re: WBQ FLORIDA LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ashley Jiminez c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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.

I. Na	ane of the limited liability company: WBQ FLORIDA	LLC		
2 (a)	166 E LEVERING MILL RD	(b)	166 E LEVERING MILL RD	
(·-·)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
	BALA CYNWYD, PA 19004	_	BALA CYNWYD, PA 19004	
	12/02/2016	_	M16000009642	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	ELLISON, AMANDA			
Registered Agent and Registered Office shown on the records of the Florida Dept, of State:				
4 MINNETONKA RD				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	SEA RANCH LAKES FL	33308	-7 PH D	
(b) Corporation Service Company				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered t</u>	Office add	dress:	
	1201 Hays Street			
	NEW Registered Office Address:	- <del></del> -	<del></del>	
	Tallahassee, FL_	32301		
the cha agent w was/we the arti	mited liability company is not organized under the lawsinge or changes are made, the Florida street address of tivill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of organization or the operating agreement of the liable. Amanda Ellison	he regist pility cor the limit mited lia	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in	
Signat	ure of a member or authorized representative of a member		Printed or typed name of signee	
the obli- to mere notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. I he is in writing of this change.  The of Registered Agent Corporation Service Company	erforma for in Ci ereby coi	in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been race E. Kirby, Asst. Vice President	