## M/8000000573

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088 Date: November 14, 2018 **KEN HOWELL** Name:\_\_ 1008703 Reference #:\_\_\_\_ Entity Name: WPIP PLANTATION PROPERTY, LLC Articles of Incorporation/Authorization to Transact Business Amendment ✓ Change of Agent **ISSUES? CALL** Reinstatement KEN: 518-213-0738 Conversion Merger Dissolution/Withdrawal Fictitious Name 

Authorized Amount:

\$25.00

Signature:

## 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

1. Na	ame of the limited liability company:	WPIP PLA	WPIP PLANTATION PROPERTY, LLC		
2. (a)					
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(*/	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	40 DANBURY ROAD		40 DANBURY ROAD		
	WILTON, CT 06897		WILTON, CT 06897		
	01/18/2018		M18000000573		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	CORPORATION SERVICE COM	<b>IPANY</b>			
J. (L)	Registered Agent and Registered Office shown on the records of	of the Florida Dep	ot. of State:		
	1201 HAYS STREET				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
			2018 1445		
	TALLAHASSEE , F	<sub>L</sub> 32301-2	TALLAHASS		
(b)	COGENCY GLOBAL INC.		NOV 14 A		
	Enter name of NEW Registered Agent and/or NEW Registere	d Office addres			
	115 North Calhoun Street, Suite	e 4	AMID: 53		
	NEW Registered Office Address:				
	Tollahassee	3230	<del></del>		
	Tallahassee , F	L	<u> </u>		
the cha agent was/w	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited let eauthorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registere liability compa of the limited	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in		
	/S/ Marc Porosoff		Marc Porosoff		
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee		
I here provisi the obi to mer notified	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, i d in writing of this change.	gree to act in t e performance led for in Chaj I hereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept oter 605, F.S. Or, if this document is being filed rm that the limited liability company has been		
Cianas	/S/ Tim Mayville				
Signatu	re of Registered Agent Tim Mountille Assistant So.	aratan.			

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Tim Mayville, Assistant Secretary