

M20000006103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

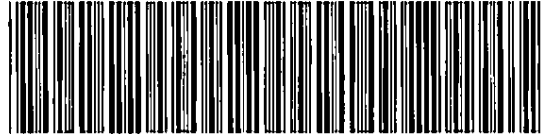
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2022 FEB 25 AM 10:43

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2022 FEB 25 PM 3:30

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O SIMMONS

FEB 28 2022

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 512796 8368290

AUTHORIZATION : 

COST LIMIT : \$ 25.00

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ORDER DATE : February 24, 2022

ORDER TIME : 3:06 PM

ORDER NO. : 512796-030

CUSTOMER NO: 8368290  
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CHANGE OF AGENT

NAME: WINGATE DEVELOPMENT, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS: \_\_\_\_\_

**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: WINGATE DEVELOPMENT, LLC

2. (a) <u>Principal office address of limited liability company:</u> <i>(Note: <b>MUST BE STREET ADDRESS</b>)</i> <u>63 KENDRICK STREET</u> <u>NEEDHAM, MA 02494</u>	(b) <u>Mailing address of limited liability company:</u> <i>(Note: <b>MAY BE POST OFFICE BOX</b>)</i> <u>63 KENDRICK STREET</u> <u>NEEDHAM, MA 02494</u>
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3. <u>07/13/2020</u> Date of filing/registration in Florida	4. <u>M20000006103</u> Document number
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5. (a) REGISTERED AGENT SOLUTIONS, INC.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
155 OFFICE PLAZA DR.

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
STE A  
TALLAHASSEE, FL 32301

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
Corporation Service Company  
**NEW** Registered Office Address:  
1201 Hays Street  
Tallahassee, FL 32301

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FL

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.

<u></u> Signature of a member or authorized representative of a member	<u>Jill Cilmi, Authorized Person</u> Printed or typed name of signer
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*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.*

<u></u> Signature of Registered Agent	<u>Grace E. Kirby, Asst. Vice President</u>
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