

m23000006636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

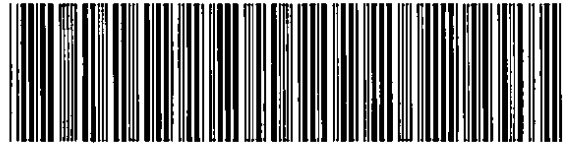
(Document Number)

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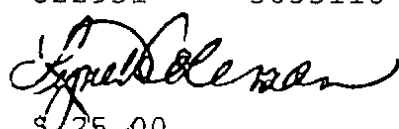
RA & RO Change



2023 JUN 30 AM 10:20

FILED  
2023 JUN 30 AM 11:16  
A. RAMSEY  
JUL - 5 2023  
OFFICE OF STATE  
TREASURY

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

ACCOUNT NO. : I20000000195  
REFERENCE : 822931 5035116  
AUTHORIZATION :   
COST LIMIT : \$ 25.00

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ORDER DATE : June 19, 2023  
ORDER TIME : 9:37 AM  
ORDER NO. : 822931-169  
CUSTOMER NO: 5035116

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CHANGE OF AGENT

NAME: WDS BULLWINKLE LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Alexxis Weiland-sorenson

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: WDS BULLWINKLE, LLC

2. (a) 448 VIKING DR  
Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*  
STE 220  
VIRGINIA BEACH, VA 23452

(b) 448 VIKING DR  
Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*  
STE 220  
VIRGINIA BEACH, VA 23452

3. 05/08/2023 Date of filing/registration in Florida

4. M23000006636 Document number

5. (a) CT CORPORATION SYSTEM  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324

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

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2023 JUN 30 AM 11:16  
CLERK 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.

Jill Cilmi Signature of a member or authorized representative of a member  
Jill Cilmi, Authorized Person 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.*

Grace E. Kirby  
Signature of Registered Agent  
Grace E. Kirby, Asst. Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00