

N00000002276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

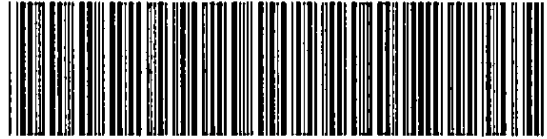
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WORLD PARTNERSHIPS, INC.
Name of Corporation

DOCUMENT NUMBER: N00000002276

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

DANIELLE CARTIER WENDT

Name of Contact Person

CARTIER CPAs LLC

Firm/Company

1000 CENTRAL AVE STE 100

Address

ST PETERSBURG, FL 33705

City/State and Zip Code

danielle@cartiercpas.com

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

For further information concerning this matter, please call:

GARY L. SPRINGER

Name of Contact Person

at (727) 709-3354

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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DIVISION OF CORPORATIONS
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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: WORLD PARTNERSHIPS, INC
2. The principal office address: 547 1ST STREET SOUTH, STE 200
ST PETERSBURG, FL 33701
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 04/05/2000 Document number: N00000002276

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

HENDRY, STONER & BROWN, PA

604 COURTLAND STREET, SUITE 326

ORLANDO, FL 32804

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CARTIER CPAs, LLC

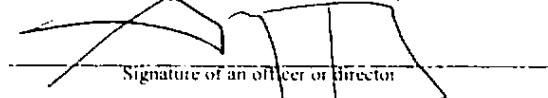
1000 CENTRAL AVE STE 100

P.O. Box NOT acceptable

ST PETERSBURG, FL 33705

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

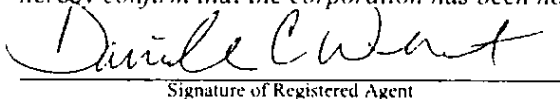
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

GARY L. SPRINGER, PRESIDENT

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

4/25/18
Date

If signing on behalf of an entity:

DANIELLE CARTIER WENDT, CPA

Typed or Printed Name

***** FILING FEE: \$35.00 *****

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

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