

P00000006230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800175360068

04/14/10--01016--021 **35.00

FILED
2010 APR 14 PM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A.

TB

APR 15 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WEW INC.
Name of Corporation

DOCUMENT NUMBER: P00000006230

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:

William Wegman
Name of Contact Person

WEW INC.
Firm/Company

10925 Phoenix Way
Address

Naples, FL 34119
City/State and Zip Code

WEWegman@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Beth M. Clary, Esq. at (239) 593-2959
Name of Contact Person 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

**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: WEW INC.
2. The principal office address: 10925 Phoenix Way
Naples, FL 34119
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/20/2000 Document number: P00000006230
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)

Clary, Mary Beth M. Esq.
5801 Pelican Bay Blvd., Suite 300
Naples, Florida 34108-2709

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

Clary, Mary Beth M. Esq.
9132 Strada Place, Third Floor
P.O. Box NOT acceptable
Naples, Florida 34108-2683

FILED
2010 APR 14 PM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

William E Wegman PD
Signature of an officer or director

William E. Wegman, Pres.
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.

Mary Beth M Clary
Signature of Registered Agent

4-12-10
Date

If signing on behalf of an entity:

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 (8/05)