P00000 115 567

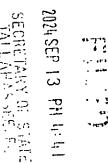
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600436460946

09/13/24--01018--005 **35.00



COVER LETTER

Amendment Section

TO:

Division of Corporations P0000115567 DOCUMENT NUMBER: 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: WhOLES ALE PROPERTIES. COM INC For further information concerning this matter, please call: at (HeeleV) at (HeeleV) (11) - 8585

Area Code & Davtime Telephone Numb Enclosed is a \$35,00 check made payable to the Department of State. Street Address: Mailing Address:

Amendment Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: WNOLESALE PROPERTIES. COM INC
2. The principal office address: 1732 154427 NO.
AUON PARK FL 33825
3. The mailing address (if different): DOBOX 1891 AUD PARICE 2338
4. Date of incorporation/qualification: 12/19/2000 Document number: POXXO115567
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)
1732 US H+27 NO
1732 US HY 27 NO AUON PARK FL 33825
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): 1732 US HY 27 N 501TE A P.O. Box NOT acceptable AUGN PARK FC 33885
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. MARK 0- CHEFFY 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.
Bignature of Registered Agent Date
If signing on behalf of an entity:
MARKO CHEELEY Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)

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