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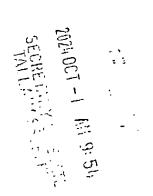
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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Wholesale PRO Name of Corporation	PERTIES, COMITAC	
DOCUMENT NUMBER: DOOD 1	15567	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matte	r to the following:	
MACK Cheeley Name of Contact Person	<u>/</u>	
Name of Contact Person UNCLESAGE BROP Firm/Company Address	ERTIES. COM FAC	
1732 US HY 27	1. NORTH	
Address AUU PARCC City/State and Zip Code	FL 33825	
E-mail address: (to be used for future annual repo	PAOACL. COM	
For further information concerning this matter, please		
	at (K. V.) Lol 3 - 85 85 Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Depar	tment of State.	
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee	
I.O. DON ODE!		

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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: Whole SACE PROPER FLES. COM TING 2. The principal office address: 1732 US H + 27 NOR + 4 H AUN PARK FL 33825
3. The mailing address (if different): P.O. BOX 1891 KWIACK FL 33
4. Date of incorporation/qualification: 1719/200 Document number: POODO 115567
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)
MARK O. CHEFLEY
1732 US HY 27 NORTH #A
AUDNIARK FL 33825 8 8
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
MACK O. CHEELEY. 1732 US HY 27 NORTH HA P.O. BOX NOT deceptable AUD N PACK EL 33835
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 Signature of an officer or direc
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 exorporation has been notified in writing of this change.
Signature of Registered Agent Date
If signing on behalf of an entity:
MANCO. CHEELEY Typed or Printed Name

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