

P02000109143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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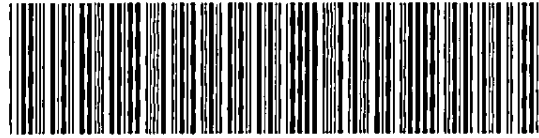
(Business Entity Name)

(Document Number)

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JAN 11 2010
C. McNAIR

inc



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 01/09/2019

Name: Marisa Kugelmann

Reference #: 1034735

Entity Name: WRI ACQUISITION, INC.

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☒ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other _____

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Authorized Amount: \$35.00

Signature: Marisa Kugelmann

**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: WRI ACQUISITION, INC.

2. The principal office address: _____

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/09/2002 Document number: P02000109143

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)

MAYOTTE, TERRY

2054 VISTA PARKWAY STE 300

WEST PALM BEACH, FL 33411

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

COGENCY GLOBAL INC.

115 North Calhoun St., Suite 4

P.O. Box NOT acceptable

Tallahassee, FL 32301

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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.

/s/ Terry Mayotte

Signature of an officer or director

Terry Mayotte

CFO and Secretary

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.*

/s/ Tim Mayville

Signature of Registered Agent

1/9/2019

Date

If signing on behalf of an entity:

Tim Mayville, Assistant Secretary

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)