P03000094048

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	· #)
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJE	Whertec Enterprises, Inc.	
	. Name of C	Corporation
DOCU	MENT NUMBER: P03000094048.	
The en	closed Statement of Change of Registered Offic	ce/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matte	er to the following:
	Cynthia Z. Jorgensen	
	Name of Co	ntact Person
	Quarles & Brady LLP	
	Firm/Co	ompany
	411 East Wisconsin Avenu	ue, Suite 2350
	Add	ress
	Milwaukee, WI 53202	
	City/State ar	nd Zip Code
	E-mail address: (to be used for f	future annual report notification)
For fur	ther information concerning this matter, please	call:
Cynt	hia Z. Jorgensen	at (277-5191) Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	ed is a \$35.00 check made payable to the Depar	tment of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
	rananassee, FE 32314	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: Whertec Enterprises, Inc.	
2. The principal office address: 5409 Highway Avenue	
Jacksonville, FL 32254	
3. The mailing address (if different): 5409 Highway Avenue Jacksonville, FL 32254	
4. Date of incorporation/qualification: 8/27/2003 Document number: P03000094048	
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)	
Brant Abraham Reiter & McCormick, PA	
50 N Laura St., Ste 2750	•
Jacksonville, FL 32202 6. The name and street address of the new registered agent (if changed) and /or registered office	ု <u>မ္</u> ကာ ရှိ
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Tricia Wilson	ite mie
5409 Highway Avenue	7
P.O. Box NOT acceptable	
Jacksonville, FL 32254	
The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.	i,
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 Tricia Wilson, Secretary Printed or typed name and title I hereby accept the appointment as registered agent and agree to act in this capacity.	
Signature of an officer or director 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.	
September 25, 2014	
Signature of Registered Agent 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 (03/12)