(Re	equestor's Name)			
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<u>_</u>	☐ WAIT	<u> </u>		
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AUG 17 2012

T. CAULEY

2804 Gateway Oaks Drive #200 Sacramento, CA 95833

Phone (800)533-7272 Fax (800)603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

NUMBER PAGES:

Date: August 13, 2012

AE:

Sharon Cooke

TO:

Florida Department of State

H1080

REFERENCE: 679433

P.O. Box 6327

Tallahasee, FL 32314

FAX:

PLEASE PERFORM THE FOLLOWING:

WM ARCHITECTS, INC.

Change of Registered Agent

SPECIAL INSTRUCTIONS: Please file on a routine and return one plain filed copy via the enclosed selfaddressed envelope.

Service Description	Check Number	<u>Name</u>	Amount
Change of Registered Agent	409757	Florida Department of State	\$35

PLEASE RETURN: Regular Mail

PLEASE CALL (800)533-7272 ATTN: Sharon Cooke TO CONFIRM FILING RESULTS

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #200 SACRAMENTO, CA 95833

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET (800) 533-7272

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: WM ARCHITECTS, INC.	_
2. The principal office address: 10 EDELMAN, IRVINE, CA 92618	-
3. The mailing address (if different):	- -
4. Date of incorporation/qualification: 08/09/2007 Document number: P07000089743	- -
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)	
CT CORPORATION SYSTEM	
1200 SOUTH PINE ISLAND	
PLANTATION, FL 33324	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	cccpf
PARACORP INCORPORATED	
236 EAST 6TH AVENUE	
P.O. Box NOT acceptable	m ω
TALLAHASSEE, FL 32303	TAT
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.	
Sobin Sloane, CFO	
Signature of an officer or director 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.	
7/1/1/2012 Signature of Registered Agent 8/13/2012	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Ninh Ho, Asst. Secretary, Paracorp Incorporated	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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