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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. Change

TR (14/15)

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Winn comm Inc. (Name of Corporation)
DOCUMENT NUMBER: 707000(2830 6
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:
Cary Stonle-1 (Name of Contact Person)
Winn Comm Inc. (Firm/Company)
780 maple Ribye Rd.
Polm Achor = 1 321683 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (727) 744438 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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: Winn comm, Inc
2. The principal office address: 780 Maple Ride Rd.
3. The mailing address (if different):
4. Date of incorporation/qualification: 12/03/07 Document number: P07000 &8 30 6
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
van Ngynen
200 Confress St Print
Oldsmor, F1 34677
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Gary Stanley
(P.O. Box NOT acceptable)
Palm Hacker, F1 34683
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 or appearage or director) Gary Stanley CEO/Prosident (Printed or typed name and tyle)
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.
(Signature of Registered Agent) 5/15/Date)
If signing on behalf of an entity:

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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