

P14000010033

VIA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

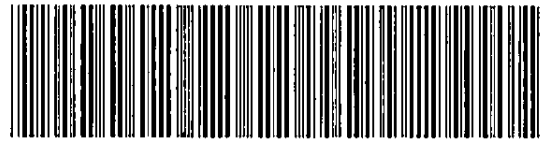
(Business Entity Name)

(Document Number)

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2024 SEP 30 PM 5:21
TAL LAMASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: W.I. 204 Corp.
Name of Corporation

DOCUMENT NUMBER: P14000010033

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:

Roberto Cordeiro

Name of Contact Person

Firm/Company

3500 Island Blvd., PH1

Address

Aventura/FL 33160

City/State and Zip Code

robertoncordeiro@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roberto Cordeiro

Name of Contact Person

at (786) 833-0150

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: W.I. 204 Corporation
2. The principal office address: 3500 Island Blvd., PH1, Aventura, FL 33160
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/03/2014 Document number: P14000010033
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)

RESIGNED

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- ROBERTO CORDEIRO
- 3500 ISLAND BLVD PH1
- AVENTURA, FL 33160
- P.O. Box NOT acceptable

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TALLAHASSEE, FL

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.

Roberto Cordeiro, Director
Signature of an officer or director

Roberto Cordeiro, 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.

Roberto Cordeiro, Sep 23, 2024 2:25 ED
Signature of Registered Agent

September 23, 2024
Date

If signing on behalf of an entity:

Roberto Cordeiro
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 (04/13)