

PI4000077384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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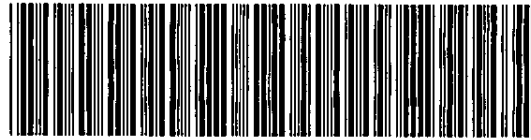
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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C.L.  
12-18-14

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Change of Corporation Registered Address

Name of Corporation

**DOCUMENT NUMBER:** P14000077384

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:

John M. Weldon

Name of Contact Person

WBT Resources, Inc.

Firm/Company

3545 South Ocean Blvd Suite 416

Address

Palm Beach, FL 33480

City/State and Zip Code

John.Weldon@wbresources.com

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

For further information concerning this matter, please call:

John M. Weldon

Name of Contact Person

at ( 434 ) 327-2562

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  
Clifton Building  
2661 Executive Center Circle  
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: WBT Resources, Inc.  
2. The principal office address: 3545 South Ocean Blvd Suite 416  
Palm Beach, FL 33480  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 9/18/2014 Document number: P14000077384

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)

John M. Weldon  
7457 Trescott Drive, Suite G  
Lake Worth, FL 33467

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

John M. Weldon  
3545 South Ocean Blvd., Suite 416  
P.O. Box NOT acceptable  
Palm Beach, FL 33480

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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.

John M. Weldon  
Signature of an officer or director

John M. Weldon  
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.*

John M. Weldon  
Signature of Registered Agent

Dec 8, 2014  
Date

If signing on behalf of an entity:

John M. Weldon  
Typed or Printed Name

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