

**2019 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N1800009179

**Entity Name:** WANDERLUST ARTS, INC.

**Current Principal Place of Business:**

5783 CYPRESS CIRCLE  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

509 E 34TH ST #203  
CHARLOTTE, NC 28205 US

**FEI Number:** 83-1638116

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WARINGER, LAURA  
5783 CYPRESS CIRCLE  
TALLAHASSEE, FL 32303 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** LAURA WARINGER

10/12/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name WARINGER, LAURA  
Address 509 E 34TH ST #203  
City-State-Zip: CHARLOTTE NC 28205

Title VP  
Name BROADFOOT, LAURA  
Address 1861 EASTON FOREST DR  
City-State-Zip: TALLAHASSEE FL 32317

Title S  
Name FAZIO, HANNAH  
Address 179 GEDDIE ROAD  
City-State-Zip: TALLAHASSEE FL 32304

Title T  
Name ARESPACOCCHAGA, CHARI  
Address 2221 ORANGE AVE EAST APT 1134  
City-State-Zip: TALLAHASSEE FL 32311

Title TR  
Name JABLONSKI, MICHAEL  
Address 51-34 30TH AVE #E4P  
City-State-Zip: WOODSIDE NY 11377

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LAURA WARINGER

PRESIDENT

10/12/2019

Electronic Signature of Signing Officer/Director Detail

Date