

F090000001140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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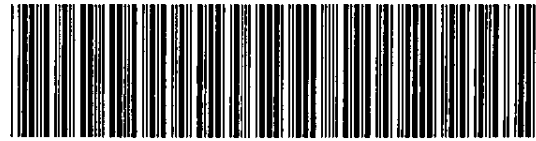
(Business Entity Name)

(Document Number)

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2012 APR -3 PM 4:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 03 2012
T. ROBERTS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 21, 2012

ANDREA WARD
WDSI INC
770 10TH AVE
GRAFTON, WI 53024

SUBJECT: WDSI, INC.
Ref. Number: F09000001140

We have received your document for WDSI, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Registered agent signature must be original.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts
Regulatory Specialist II

Letter Number: 712A00009808

RECEIVED
12 APR -3 AM 9:33
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WDSI, Inc.
(Name of Corporation)

DOCUMENT NUMBER: F09000001140

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:

Andrea Ward
(Name of Contact Person)

WDSI Inc.
(Firm/Company)

770 10th Avenue
(Address)

Grafton, WI 53024
(City/State and Zip Code)

For further information concerning this matter, please call:

Andrea Ward at (262) 377-7621
(Name of Contact Person) (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 Wisconsin in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: WDSI, Inc.
2. The principal office address: 770 10th Avenue, Grafton, WI 53024
3. The mailing address (if different): P.O. Box 830, Cedarburg, WI 53012
4. Date of incorporation/qualification: 2/6/2001 Document number: F09000001140
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)

Business Filings Incorporated
515 E. Park Avenue
Tallahassee, FL 32301

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

Northwest Registered Agent LLC
3111 W. Dr. MLK Blvd. Suite 100-B180
Tampa, FL 33607

P.O. Box NOT acceptable

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]
Signature of an officer or director

Andrea Ward - President
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.

[Signature]
Signature of Registered Agent

3/27/12
Date

If signing on behalf of an entity:

Dan Keen, Manager
Typed or Printed Name

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

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TALLAHASSEE, FLORIDA