

L22000198750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

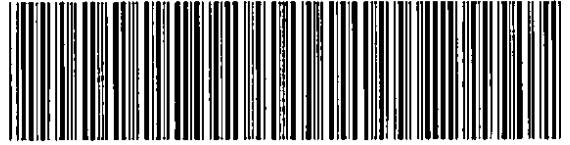
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 AUG -7 PM 2:24
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

Inspirations By Wende

SUBJECT: _____
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Wende Datema

Name of Person

Inspirations By Wende

Firm/Company

5843 Haiti Drive

Address

Naples, FL 34113

City/State and Zip Code

w.datema@yahoo.com

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

For further information concerning this matter, please call:

Wende Datema

269

275-4272

at (_____) _____

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 25, 2023

WENDE DATEMA
5843 HAITI DRIVE
NAPLES, FL 34113

SUBJECT: INSPIRATIONS BY WENDE, LLC
Ref. Number: L22000198750

2023 AUG -7 PM 1:21

RECEIVED

Division of Corporations

We have received your document for INSPIRATIONS BY WENDE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the New Registered Agent in part (b).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 723A00016603

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Inspirations By Wende, L.L.C.

1. Name of the limited liability company: _____
5843 Haiti Drive, Naples FL 34113

5843 Haiti Drive, Naples FL 34113

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

4/26/2022

122000198750

3. _____ 4. _____
Date of filing/registration in Florida Document number
CSC (Corporation Services Company)

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
CSC (Corporation Services Company)

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1201 Hayes Street

Tallahassee 32301
FL

(b) Wende Datema
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

5843 Haiti Drive

NEW Registered Office Address:

Naples 34113
FL

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2023 AUG -7 PM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Wende Datema
Signature of a member or authorized representative of a member

Wende Datema

Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Wende Datema
Signature of Registered Agent

5/8/23