## N13000010094

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C/12/7/2022

## **COVER LETTER**

TO:

Amendment Section

SUBJECT: Wrecking Crew Gives, Inc	
Name of Corporation	
DOCUMENT NUMBER:	
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:	
Darren Sherwood	
Name of Contact Person	
Wrecking Crew Gives, Inc	
Firm/Company 1100 8th Avenue 8 #221B	
Address Naples, FL 34102	
City/State and Zip Code	
darren@wreckingcrewgives.org	
E-mail address: (to be used for future annual report notification)	<del></del>

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

Name of Contact Person

**Street Address:** 

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

CR2E045 (04/13)

Darren Sherwood



October 24, 2022

DARREN SHERWOOD \*\*\*2ND MAILING\*\* 1100 8TH AVENUE S #211B NAPLES, FL 34102

SUBJECT: WRECKING CREW GIVES, INC.

Ref. Number: N13000010094

We have received your document for WRECKING CREW GIVES, 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):

The registered agent must sign accepting the designation.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 122A00023747



September 6, 2022

DARREN SHERWOOD 1100 8TH AVENUE S #221B NAPLES, FL 34102

SUBJECT: WRECKING CREW GIVES, INC.

Ref. Number: N13000010094

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

Claretha Golden Regulatory Specialist II

Letter Number: 322A00019803

RECEIVED OCT 14 2022

## 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. Wrecking Crew Gives, Inc. 1. The name of the corporation: 1100 8th Avenue S #211B, Naples, FL 34102 2. The principal office address: 3. The mailing address (if different): \_ N13000010094 11/08/2013 4. Date of incorporation/qualification: Document number: 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) 2016 Painted Palm Drive Naples, FL 34119 6. The name and street address of the new registered agent (if changed) and /or registered of here. (if changed): 1100 8th Avenue S, Unit 211B P.O. Box NOT acceptable Naples, FL 34102 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. Darren Sherwood, President Printed or typed name and title Signati 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. 6'14/22 nature of Registered Agent

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

If signing on behalf of an entity:

Typed or Printed Name