

P09000085898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

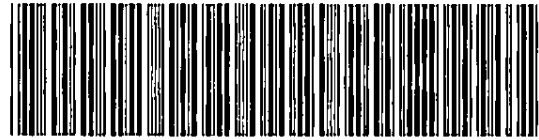
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Independently Developing A New Way, Inc  
Name of Corporation

**DOCUMENT NUMBER:** P09000085898

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:

Jennifer Biggins

Name of Contact Person

Independently Developing A New Way, Inc

Firm/Company

750 South Orange Blossom Trl STE 228

Address

Orlando FL 32805

City/State and Zip Code

IDNW21@gmail.com

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

For further information concerning this matter, please call:

Jennifer Biggins

Name of Contact Person

at ( 407 ) 982-6106

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: \_\_\_\_\_
2. The principal office address: 750 South Orange Blossom Trl Ste 228  
Orlando FL 32805
3. The mailing address (if different): P.O. Box 681783 Orlando FL 32868
4. Date of incorporation/qualification: 10/15/2009 Document number: PD9000085898
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)

750 South Orange Blossom Trl  
Ste 228  
Orlando FL 32805

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

235 E 5th Street  
Unit #2  
Apopka FL 32703

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.

Janifer Biggins  
Signature of an officer or director

Janifer Biggins / Owner  
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 of Registered Agent

\_\_\_\_\_  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)

04:11:17 PM 07/13/2010

**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: Independently Developing a New Way, Inc
2. The principal office address: 750 South Orange Blossom Trl STE 6 Orlando FL 32805
3. The mailing address (if different): P. o Box 681783 Orlando FL 32868
4. Date of incorporation/qualification: 10/15/2009 Document number: P09000085898
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)

750 South Orange Bloosm Trl

STE 228

Orlando FL 32805

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

235 E 5th Street

Unit 6

P.O. Box NOT acceptable

Apopka FL 32703

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 of an officer or director

Jennifer Biggins  
\_\_\_\_\_  
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 of Registered Agent

8/19/2020  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Jennifer Biggins  
\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (04/13)