

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000256593

**Entity Name:** WANDERLUST ADVENTURES LLC BW

**Current Principal Place of Business:**

8930 COTTONGRASS ST  
WALDORF, MD 20603

**Current Mailing Address:**

8930 COTTONGRASS STREET  
WALDORF, MD 20603 US

**FEI Number: 84-4171948**

**Certificate of Status Desired: No**

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

BIAGI, ANGELA  
224 S FEDERAL HWY  
APT 4  
LAKE WORTH BEACH, FL 33460 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           WEBSTER, BRETTANY  
Address        8930 COTTONGRASS STREET  
City-State-Zip: WALDORF MD 20603

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: BRETTANY WEBSTER**

**MANAGER**

**05/01/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date