

P03000092173

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

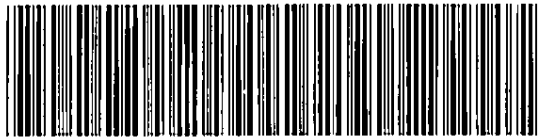
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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18 MAY -7 PM 3:01

MAY 17 2018

I ALBRITTON

RALPH
CH 8

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 MAY 16 AM 10:40

FILED

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: Glinda 5/7

- CERTIFIED COPY _____
- PHOTOCOPY _____
- CUS _____
- FILING RT Change

1. Overland Ventures, Inc.
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 8, 2018

CORPORATE ACCESS, INC.
236 EAST 6TH AVENUE
TALLAHASSEE, FL 32303

SUBJECT: OVERLAND VENTURES, INC.
Ref. Number: P03000092173

Corrected

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The form you submitted is for a Limited Liability Company, but your entity is a Profit Corporation. Please complete and return the enclosed blank form(s).

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 718A00009444

18 MAY 16 PM 2:31

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: OVERLAND VENTURES, INC.
- 2. The principal office address: _____
66 White Street, Unit 501, NEW YORK, NY 10013
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 07/26/2010 Document number: P10000061372
- 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)

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

2018 MAY 16 AM 10:40
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
NRAI Services, Inc.
1200 South Pine Island Road
P.O. Box NOT acceptable
Plantation FL, 33324

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

Carolina Herrera Assistant Secretary
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. This document is being filed merely to reflect a change in the registered office address. I have notified the corporation in writing of this change.

[Signature] Registered Agent 5/1/18 Date

If signing on behalf of an entity:
Keith Vega
Typed or Printed Name

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