	eby 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 that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears
abov	e, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: JOHN OLDLAND

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P93000052070

Entity Name: OLDLAND FLORIDA ENTERPRISES, INC.

Current Principal Place of Business:

2 ROXBOROUGH ST E #303 TORONTO, ONT M4W 3V7

Current Mailing Address:

2 ROXBOROUGH ST E #303 TORONTO, ONT M4W 3V7 CA

FEI Number: 65-0454739

Name and Address of Current Registered Agent:

ROBERTS, DONNA M CPA 133 HARBOR DRIVE SOUTH VENICE, FL 34285 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: DONNA M. ROBERTS				01/20/2020	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	D, P	Title	D, S		
Name	OLDLAND, JOHN	Name	OLDLAND, ALICE		
Address	2 ROXBOROUGH ST E # 303	Address	2 ROXBOROUGH ST E #303		
City-State-Zip:	TORONTO ONT M4W 3V7	City-State-Zip:	TORONTO ONT M4W 3V7		

Certificate of Status Desired: No

FILED Jan 20, 2020 Secretary of State 5838695328CC

> 01/20/2020 Date