L09000095528

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COVER LETTER

TO: Registration Section Division of Corporations							
VA HOLDINGS, LLĊ	·						
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.						
Please return all correspondence concerning th	is matter to the following:						
JAY JONNAGADLA							
Name of Person							
VA HOLDINGS, LLC.							
Firm/Company							
9599 SHEPARD PL							
Address							
WELLINGTON, FL 33414							
City/State and Zip Code							
JJONNAGADLA@YAHOO.COM							
E-mail address: (to be used for future and	nual report notification)						
For further information concerning this matter	, please call:						
JAY JONNAGADLA	319 431-5809						
Name of Person	Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following	g amount:						
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy						

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

(a) _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(t	o) M	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2922 OLD ORCHARD RD NE		9599 SH	EPARD PL
	CEDAR RAPIDS, IA 52402		WELLING	STON, FL 33414
	11/08/2010		L0900009	5528
	Date of filing/registration in Florida	4.		Document number
a)	CORPORATION SERVICE COMPANY			
	Registered Agent and Registered Office shown on the records of	f the Florid	a Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>si</u>	
	1201 HAYS STREET			7.020
	TALLAHASSEE, F.	32301		2015 OCT SECRET
o)	JAY JONNAGADLA			553 4
,, .	Enter name of NEW Registered Agent and/or NEW Registere	d Office ac	idress:	F1 - F1
	VA HOLDINGS, LLC.			PH 4: 21 of STATE fridation
	NEW Registered Office Address:			
	9599 SHEPARD PL			

Signature of a member or authorized representative of a member

JAY JONNAGADLA - MANAGER

Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent