

From: Calandrino Law Firm

407 601 4910

11/24/2014 15:42

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CALANDRINO LAW FIRM
Account Number : I20090000062
Phone : (407)601-4905
Fax Number : (407)601-4910

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Corporations@floridabusinesskw.com

**LLC REGISTERED AGENT CHANGE
VEA INVESTMENTS LLC**

Certificate of Status	0
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Page Count	03
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LLC PA Change

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Dr. 11-25-14

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11/14/2014 1:26:02 PM PAGE 1/001 Fax Server



November 14, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

VEA INVESTMENTS LLC
1650 SAND LAKE ROAD
SUITE 135
ORLANDO, FL 32809US

SUBJECT: VEA INVESTMENTS LLC
REF: L13000064294

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

The form you submitted is for a corporation, but your entity is a limited liability company. Please download the registered agent change form for a limited liability company pursuant to Section 605 of the Florida Statutes.

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.

Darlene Connell
Regulatory Specialist III

FAX Aud. #: B14000262931
Letter Number: 014A00024275

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14 NOV 24 PM 4:22
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VEA Investments, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Phillip K. Moeller

Name of Person

Assured Compliance Services, LLC

Firm/Company

214 S. Park Avenue

Address

Winter Park/FL 32789

City/State and Zip Code

corporations@floridabusinesslaw.com

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

For further information concerning this matter, please call:

Phillip K. Moeller

Name of Person

at (407) 621-4200

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 amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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.

1. Name of the limited liability company: VEA Investments, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

1650 Sand Lake Rd. Suite 135-A

Orlando, FL 32809

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

05/02/2013

L13000064294

3. _____ 4. _____
Date of filing/registration in Florida Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Orlando Perez

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1005 W. Oakridge Road Suite 1

Orlando, FL 32809

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Assured Compliance Services, LLC

NEW Registered Office Address:

214 S. Park Avenue

Winter Park, FL 32789

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Viviana M. Tejada Cruz
Signature of a member or authorized representative of member

Viviana M Tejada Cruz

Printed or typed name of signer

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]
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

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14 NOV 24 PM 2:37
TALLAHASSEE, FLORIDA