

PO2000019551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

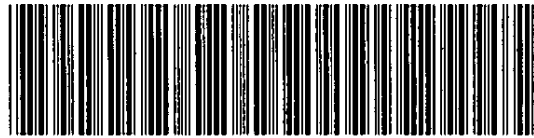
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100134307221

08/14/08--01012--012 **35.00

FILED
08 AUG 14 PM 3:24
TALLAHASSEE, FLORIDA

ST

20/2/18
ST

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VECTOR CONSULTING, INC
(Name of Corporation)

DOCUMENT NUMBER: P02000019551

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAHIM ISMAIL
(Name of Contact Person)

VECTOR CONSULTING INC
(Firm/Company)

1225 BENNETT DRIVE, UNIT 143
(Address)

LONGWOOD, FL 32750
(City/State and Zip Code)

For further information concerning this matter, please call:

RAHIM ISMAIL at (407) 265 9995
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of the corporation: VECTOR CONSULTING, INC.
2. The principal office address: 1225 BENNETT DRIVE UNIT 143
LONGWOOD, FL 32750
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/18/2002 Document number: P02000019551
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

JOE P CALDERWOOD

2175-C CHENEY HWY

TITUSVILLE, FL 32780

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

RAHIM ISMAIL

1225 BENNETT DRIVE, UNIT 513

(P.O. Box NOT acceptable)

LONGWOOD, FL 32750

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)

Officer RAHIM ISMAIL.
(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. Or, if this
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the
corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

08/12/08
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)