

May 16, 2007

VEESOLUTIONS, INC.  
102 TULLAMORE TRAIL  
TYRONE, GA 30290

SUBJECT: VEESOLUTIONS, INC.  
Ref. Number: P03000080855

P03000080855

It has come to our attention through an audit of our records that your corporation has improperly designated your registered agent.

Florida law does not allow a corporation to designate a registered agent outside the State of Florida. The registered agent may be changed by filing the enclosed registered office change form free of charge. Please consider this letter as your 60 days notice that if you do not correct this error by July 16, 2007, your corporation will be administratively dissolved. Please send this form back to my personal and confidential attention to ensure the proper filing of this document.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Michelle Milligan  
Document Specialist Supervisor Letter Number: 007A00034127  
Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida  
32314

07 JUL 24 PM 1:31  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

600106737906

+ NEXT, - PREV, 1. MENU, 2. FILING, 3. OFFICERS  
7. LIST, 8. NEXT FILING ON LIST, 9. PREV FILING ON LIST  
ENTER SELECTION AND CR:

RA accepted in error  
with Georgia address  
no charge

©

RA chg

KRC 7/26/07

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: VEESOLUTIONS, INC.  
(Name of Corporation)

DOCUMENT NUMBER: P03000080855

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:

Tony Vlachakis  
(Name of Contact Person)

Ve solutions, Inc.  
(Firm/Company)

102 Tullamore Trail  
(Address)

Tyrone, GA 30290  
(City/State and Zip Code)

RECEIVED  
07 JUL 24 AM 8:00  
DIVISION OF CORPORATIONS

For further information concerning this matter, please call:

Tony Vlachakis at ( 954 ) 336-9302  
(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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Veesolutions, Inc

2. The principal office address: 102 Tullamore Trail  
Tyrone, GA 30290

3. The mailing address (if different): same as above

4. Date of incorporation/qualification: 7/23/2003 Document number: PO3000080855

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

<del>Maria Orellana</del>	<u>Tony Vlachakis</u>
<del>443 Lakeview Drive Apt. 4</del>	<u>102 Tullamore Trail</u>
<del>Weston, FL 33326</del>	<u>Tyrone, GA 30290</u>

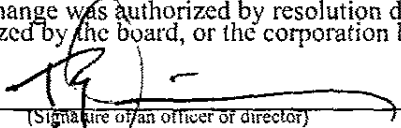
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Maria Orellana  
443 Lakeview Drive Apt. 4  
(P.O. Box NOT acceptable)  
Weston, FL 33326

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA


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 of an officer or director)

Tony Vlachakis - President  
(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 of Registered Agent)

7-19-2007  
(Date)

If signing on behalf of an entity:

Maria Orellana  
(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)