

P050000115672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

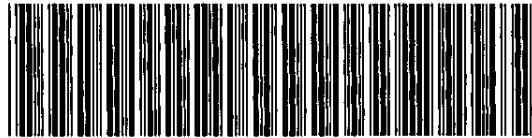
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700240540027

10/10/12--01008--014 \*\*35.00

12 OCT 10 PM 3:49

RECEIVED  
DIVISION OF CORPORATE AFFAIRS

RO/Ra/chg  
10/11/12

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** VEDA INVESTMENT CORP.  
Name of Corporation

**DOCUMENT NUMBER:** P05000115672

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:

MICHAEL SWORDS

Name of Contact Person

SDS ACCOUNTING

Firm/Company

350 HOMESTEAD RD.

Address

LEHIGH ACRES, FL 33936

City/State and Zip Code

DAMIR D SABOLOVIC. DE

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

For further information concerning this matter, please call:

MICHAEL SWORDS

Name of Contact Person

at ( 239 ) 369-5777

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

1. The name of the corporation: VEDA INVESTMENT CORP  
2. The principal office address: 516 JOEL BLVD., SUITE A  
LEHIGH ACRES, FL 33936  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 8/18/2005 Document number: P05000115672

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

SIEGFRIED LORENZ

420 LEE BLVD.

LEHIGH ACRES, FL 33936

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

HEINZ PFUNER

516 JOEL BLVD., SUITE A

P.O. Box NOT acceptable

LEHIGH ACRES, FL 33936

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.

Damir Sabolovic  
Signature of an officer or director

DAMIR SABOLOVIC

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

7/18/2012

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 (03/12)

RECEIVED  
DIVISION OF CORPORATIONS  
OCT 10 PM 3:49