P11000035874

(Requestor's Name)		
(Address)		
(Ac	idress)	
(Ci	ty/State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STALL SECRETARY OF STALLOH DE CORPORALIOH

RD/RDCh8

COVER LETTER

Division of Corporations			
SUBJECT: VW Outsourcing Solutions Inc. Name of Corporation			
Name of Corporation			
DOCUMENT NUMBER: P11000035874			
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:			
Francois van Wyk Name of Contact Person			
Name of Contact Person			
VW Outsourcing Solutions Inc.			
Firm/Company			
10150 Belle Rive Blvd Unit 710			
Address			
Jacksonville, FL 32256 City/State and Zip Code			
City/State and Zip Code			
vwos@comcast.net			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Francois van Wyk at (904) 641-4811			
Francois van Wyk at (904) 641-4811 Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			
Amendment Section Amendment Section			

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

TO:

Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607 statement of change is submitted for a corporation organized u	nder the laws of the State of Florida
in order to change its registered office or registered a	•
1. The name of the corporation: VW Outsourcing Solu	
2. The principal office address: 10150 Belle Rive Blvd Ur	nit 710
Jacksonville, FL 32256	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 04/12/2011	Document number: P11000035874
5. The name and street address of the current registered agent as Florida Department of State: (If resigned, enter resigned)	nd registered office on file with the
Corporation Service Company	
1201 Hays Street	<i>-</i>
Tallahassee, FL 32301	
6. The name and street address of the new registered agent (if cl (if changed):	2
Francois van Wyk	ORPO RALLE
10150 Belle Rive Blvd Unit 710	.
P.O. Box NOT accepta	
Jacksonville, FL 32256	
The street address of its registered office and the street address as changed will be identical.	ss of the business office of its registered agent,
Such change was authorized by resolution duly adopted by it authorized by the board, or the corporation has been notified	s board of directors or by an officer so in writing of the change.
Signature of an officer or director	Francois van Wyk President Printed or typed name and title
I hereby accept the appointment as registered agent and agre I further agree to comply with the provisions of all statutes re of my duties, and I am familiar with and accept the obligation document is being filed merely to reflect a change in the regis corporation has been notified in writing of this change.	te to act in this capacity. Elative to the proper and complete performance
	01/25/2012
Signature of Registered Agent	Date
If signing on behalf of an entity:	
Typed or Printed Name	
* * * FILING FEE: \$3	5.00 * * *

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