

P1500068563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

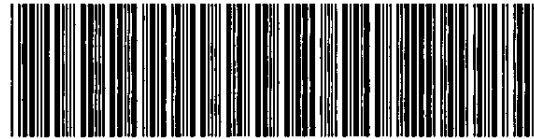
(Business Entity Name)

(Document Number)

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2017 MAR 10 P 12:52
SEC. OF STATE
TALLAHASSEE, FLORIDA

FILED

MAR 14 2016
T. LEMIEUX

Handwritten signature

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Vee Transport INC.
Name of Corporation

DOCUMENT NUMBER: P150000068563

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:

Vanessa Corredor
Name of Contact Person

Vee Transport INC.
Firm/Company

13139 paloma dr
Address

orlando FL 32837
City/State and Zip Code

Vcorredor3@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

_____ at (_____) _____
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: VCE transport
2. The principal office address: 13139 paloma dr
Orlando FL 32837
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 8/13/15 Document number: P150000068563

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)

13139 paloma dr Orlando FL 32837

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

Nicholas Luczyk
3497 W 92nd PL Hialeah, FL 33018

P.O. Box NOT acceptable

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 this change.

Vanessa
Signature of an officer or director

Vanessa Corredor
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.

Nicholas Luczyk
Signature of Registered Agent

3/18/17
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