

P160000 19539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

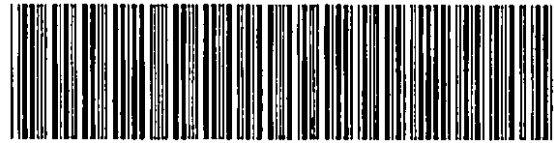
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/26/17--01030--013 **35.00

S. TALLENT

JUL 25 2017

RIA-CH

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JUL 21 PM 12:21
SECRETARY OF STATE
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 3, 2017

JOSEPH DEAN
VEAMCAST
5940 30TH AVE S GROTON UNIT 111
GULFPORT, FL 33707

SUBJECT: VEAMCAST CORP
Ref. Number: P16000019539

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 717A00013457

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VEAMCAST CORP
Name of Corporation

DOCUMENT NUMBER: P16000019539

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:

JOSEPH DEAN
Name of Contact Person

VEAMCAST
Firm/Company

5940 30th AVE S. GUSTON UNIT 111
Address

GULFPORT FL 33707
City/State and Zip Code

JOE@JOEDDEAN.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH DEAN at 310 593 4485
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 FL
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: VEAMCAST CORP
2. The principal office address: 5940 30th AVE. S. GRAFTON UNIT 111
GULFPORT FL 33707
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 2/29/2016 Document number: P16000019539
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)

Corporate Service Company
1201 HAYS STREET
Tallahassee, FL 32301

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

JOSEPH DEAN
5940 30th AVE S. GRAFTON UNIT 111
P.O. Box NOT acceptable
GULFPORT FL 33707

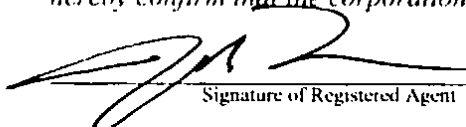
The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

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

JOSEPH DEAN, CEO
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

JOSEPH DEAN, 3/12/17
Date

If signing on behalf of an entity:

Joseph Dean
Typed or Printed Name

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

FILED
17 JUL 21 PM 12:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA