P19000014586

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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Vecland Capital Corporation Name of Corporation		
·		
DOCUMENT NUMBER: P1900	0014586	
The enclosed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this	is matter to the following:	
Veasti Ciumac		
Name of Contact Person Vecland Capital Corporation		
Firm/Company 390 NORTH ORANGE AVENUE SUITE 2300		
Address ORLANDO, FL 32801		
City/State and Zip Code mymanager@veclandcapitz	al.com	
E-mail address: (to be used for future annua	al report notification)	
For further information concerning this matter,	please call:	
Veasti Ciumae	at (400 0699	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the	e Department of State.	
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida Statut tion organized under the laws of the State of <u>Flori</u> e or registered agent, or both, in the State of Florid	da		
1. The name of the corporation: 2. The principal office address: Vecland Capital Corporation 390 NORTH ORANGE AVENUE SUITE 2300 ORLANDO, FL 32801					
3. The mailing a		2019 P19000014586 Document number:			
4. Date of incorp	poration/qualification:	Document number:			
	street address of the current retirement of State: (If resigned, en	egistered agent and registered office on file with the ster resigned)	3		
	LEGALINC CORPORATE SI	ERVICES INC.			
	5237 SUMMERLIN COMMO	ONS SUITE 400 FORT MYERS, FL 3390	2029 MAY 13		
6. The name and (if changed):		stered agent (if changed) and /or registered office	<u> </u>		
	200 00 200 0000000000000000000000000000	200 LT 1 ALINEWNAL D 17 22201	24		
	P.O. Box NOT acceptable				
The street address changed will	ess of its registered office and be identical.	the street address of the business office of its reg	istered agent,		
Such change wa authorized by th	as authorized by resolution du ne board, or the corporation h	aly adopted by its board of directors or by an office as been notified in writing of the change.	er so		
		Veasti Ciumac President & CEO			
3	re of an officer or director	Printed or typed name and title			
I furthèr agrée d of my duties, an document is béi	the appointment as registered to comply with the provisions of I am familiar with and accept filed merely to reflect a child been notified in writing of the	d agent and agree to act in this capacity, of all statutes relative to the proper and complete opt the obligation of my position as registered age ange in the registered office address, I hereby consistence.	e performance ent. Or, if this nfirm that the		
		April 30, 2020			
Sig	nature of Registered Agent	Date			
If signing on be	half of an entity:				
Veasti Ciumac					
Т	vped or Printed Name				

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