P06000015977

(R	lequestor's Name)	
(A	ddress)	
(A	ddress)	
	ity/State/Zip/Phone #)	
(-	,. <u>-</u>	
PICK-UP	☐ WAIT	MAIL
	usiness Entity Name)	
Ų-	,	
(C	Occument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	o Filing Officer:	
		

Office Use Only



100067708031

43/17/96 411143-- 660 **65.66

TILED

2006 MAR 17 AM 9: 47

SEURITIARY OF STATE.
ALLAHASSEE ET STATE.

R.A.Chang

6. Coullists MAR 2 4 2006

COVER LETTER

PO: Amendment Section Division of Corporations
SUBJECT: Legal Research Services Center Inc. (Name of Corporation)
DOCUMENT NUMBER: POGO 1597 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:
Susana Vazquez (Name of Contact Person)
Legal Research Services Center!
POBOX U16198
Miumi Beach Fl 33141 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (786) 251-627 (Area Code & Daytime Telephone Number)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a \$35.00 check made payable to the Department of State.

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Legal Research Services Center Inc.
2. The principal office address: 12550 Biscarne Blvd.
North Miami FL 33181
3. The mailing address (if different): PO BOX 416198
miami Beach FL 33141
4. Date of incorporation/qualification: 1/27/04 Document number: PD 60001597
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Susana Vazquez
12985 Coronado TR.
North Miami Ft 3318
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Susana Varquez P.A.
1840 NE 144 ST ES S (P.O. Box NOT acceptable) North Miam Beach FL 33/EL S
North Miami Beach FL 33/健康 至 I
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 office to authorized by the board, or the corporation has been notified in writing of the change.
Sysana Vazquez P (Senature of an Hicer or director) (Printed or typed name and little)
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) 2 3 14 0 Cp
If signing on behalf of an entity:
La 1/29 1
(Types 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 (8/05)