# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRES

SIGNATI	ΙΙΙΔΝ	FΥ

Entity Name: LEGACY MARKETING SYSTEMS INC.

## Current Principal Place of Business:

6800 SW 40 STREET #105 MIAMI, FL 33155

# Current Mailing Address:

6800 SW 40 STREET #105 MIAMI, FL 33155 US

#### FEI Number: 46-3528061

#### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

FOLEY, DEREK J 6800 BIRD RD 105 MIAMI, FL 33155 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

**Officer/Director Detail :** Title Р Title S FOLEY, WILLIAM J FOLEY, DEREK J Name Name 6800 SW 40 STREET #105 6800 BIRD RD Address Address 105 City-State-Zip: MIAMI FL 33155 City-State-Zip: MIAMI FL 33155

Electronic Signature of Signing Officer/Director Detail

### FILED Apr 19, 2019 Secretary of State 4534734828CC

Date

Certificate of Status Desired: No

04/19/2019 Date