## H19846

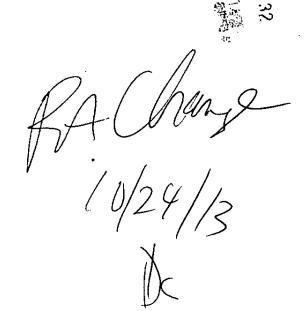
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
<del></del>				
T				
Special Instructions to Filing Officer:				
·				

Office Use Only



600252739746

10/18/13--01033--008 \*\*35.00





CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper acasper5@cscinfo.com

Date: October 16, 2013

Order#: 848458/003

Re: LMG, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

statement of cha	nge is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida on organized under the laws of the State of or registered agent, or both, in the State of	Florida
1. The name of	the corporation: LMG, INC.		
2. The principal	office address: 2350 Investors R	ow, Orlando, FL 32837-8331	
3. The mailing a	address (if different): P.O. Box 77	70429, Orlando, FL 32877-0429	
4. Date of incorp	poration/qualification: 09-06-198	Document number: H19846	
	d street address of the current regiterment of State: (If resigned, enter	istered agent and registered office on file wrresigned)	vith the
	Leslie M. Goldberg		
	5433 Osprey Isle Lane		
	Orlando	FL 32819-4073	
6. The name and (if changed):	d street address of the new registe	ered agent (if changed) and /or registered of	3 CT 18 CH 2:
	Corporation Service Company		32
	1201 Hays Street	1.	9 (g) -
	P.O. Tallahassee	Box NOT acceptable FL 32301	
			-
The street address changed will	ess of its registered office and the identical.	e street address of the business office of i	ts registered agent,
Such change wa	as authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by an been notified in writing of the change.	officer so
		Dona Priebe, Vice President	10/14/2013
_	re of an officer or director	Printed or typed name and ti	tle
I furthér agrée performance of agent. Or, if th hereby confirm	to comply with the provisions of my duties, and I am familiar wi	gent and agree to act in this capacity. all statutes relative to the proper and con th and accept the obligation of my positio by to reflect a change in the registered offi otified in writing of this change.	n as registered
By: Sil	in Chresper	10/14/2013	<u>.</u>
-	mature of Registered Agent	Date	
If signing on be	chalf of an entity:		
	t, Assistant Vice President	_	
Т	yped or Printed Name		

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