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J. BRYAN

DEC. 17 2012

**EXAMINER** 

## **COVER LETTER**

Division of Corporations			
SUBJECT: The Legal Dog, L	LC_		
Name of L	Limited Liabilit	y Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered O	office Change a	nd fee(s) are submitte	d for filing.
Please return all correspondence concerning	this matter to th	ne following:	
Ravi Batta			
Name of Person		-	
			2012 SE
Firm/Company		•	ASSAH AND
21490 West Dixie Highw	⁄ay		2012 DEC 14 PM 1:25 SECRETARY OF STATE TALLAHASSEE. FLORID
Address		•	8E 7:2
Aventura, FL 33180			DE <b>5</b>
City/State and Zip Code		•	
ravi@rslawpa.com			
E-mail address: (to be used for future annual report no	otification)	•	
For further information concerning this matter	er, please call:		
Ravi Batta	<sub>at (</sub> 305	895-6680	
Name of Person		rea Code & Daytime Telepho	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regis Divis P.O. 1	tration Section ion of Corporations Box 6327 hassee, Florida 32314	
Enclosed is a check for the followin	ig amount:		,

☐ \$55 Filing Fee & Certified Copy

■ \$25 Filing Fee

**TO:** Registration Section

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	me of the limited liability company: The Legal Dog, LLC	
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	21490 West Dixie Highway Aventura, FL 33180
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	21490 West Dixie Highway Aventura, FL 33180
03/18/20	008	L08000028032
3. Da	nte of filing/registration in Florida	4. Document number
5. (a	Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State.
	Registered Agent:	Ravi Batta
	Registered Office Address:	11900 Biscayne Bivd. Ste. 505
		North Miami, FL 33181
	NEW Registered Agent:	Ravi Batta
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	21490 West Dixie Highway
	112001 221 120 2211 131 222 231	Aventura ,FI_33180
confir and the liabilithe me the or	limited liability company is not organized under the larmed that after the change or changes are made, the Flate business office of the registered agent will be identifity company, it is hereby confirmed that the change(s) tembers of the limited liability company or as otherwise perating agreement of the limited liability company.	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote of
Signatu	re of a member or authorized representative of a member	
	Ravi Batta	_
	or typed name of signee	
I here compl and I Chap addre	eby accept the appointment as registered agent and as ly with the provisions of all statutes relative to the pro am familiar with and accept the obligations of my pos ter 608, F.S. Or, if this document is being filed to me ass. I hereby contirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent