1100001122

(Requestor's Name)		
(Address)		5
(Address)		
Ç 1.2.1	,	
(City/State/Zip/Phone #)		
	—	
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Doc	cument Number)	
(200	, amont i varibor,	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
Operium mandanona to 1 mmg omoer.		

Office Use Only



900212082789

09/16/11--01016--014 **25.00

SECRETARY OF STATE

T. CLINE
SEP 19 2011
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Legal Strategies & Co Name of Lin	nsulting, P.L. nited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for f	iling.	
Please return all correspondence concerning the	is matter to the following:		
W. Gregory Steube			
Name of Person			
Legal Strategies & Consulting, P.	L.		
Firm/Company			
6230 University Parkway, Suite 20	4	As &	
Address		II SE	(Sec. 7
Sarasota, FL 34240		2011 SEP 16 SECRETARY	**************************************
City/State and Zip Code			D-471
wgsteube@becker-poliakoff.com		AMII: 08 OF STATE E. FLORIDA	\$
E-mail address: (to be used for future annual report notif	ication)		
For further information concerning this matter,	please call:		
Greg Steube	t (941) 366-8826		
Name of Person	Area Code & Daytime Telephone Numl	ber	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following a	amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

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. Name of the limited liability company: Legal	Strategies & Consulting, P.L.
2. (a) Principal office address of limited liability compa	any:
(Note: MUST BE STREET ADDRESS)	6230 University Parkway, Suite 204 Sarasota, FL 34240
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	6230 University Parkway, Suite 204
	Sarasota, FL 34240
1/4/2011	L11000001122
3. Date of filing/registration in Florida	4. Document number ·
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:
Registered Agent:	W. Gregory Steube
Registered Office Address:	6320 Venture Drive
	Suite 104 Lakewood Ranch, FL 34202
(b) Enter name of NEW Registered Agent and/or N	EW Registered Office address Etc.
(b) Eller hance of the wife state and of the	, D
NEW Registered Agent:	W. Gregory Steube
NEW Registered Office Address:	6230 University Parkwayn Suite 204
(MUST BE FLORIDA STREET ADDRESS)	Sarasota ZZL 34240
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as off or the operating agreement of the limited liability company.	e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote herwise provided in the articles of organization
W. Gregory Steube	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability compositions of the composition of t	l agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office any has been notified in writing of this change.
Signature of Registered Agent	
Division of Corporations, P.O. Box FILING FEE:	•