116000037126

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	***
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
i -		

/

Office Use Only



000300114490

06/12/17--01027--002 **25.00

SECRETARY OF STATE

III. HORRIE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Legal Advocates PL	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	te Change and fec(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
William C. Slabang Name of Person	
Legal Advocates, PLLC Firm/Company	<u></u>
Firm/Company	
2424N. Federal Highwa	y Snite 41
Boca Raton FL 3343/ City/State and Zip Code	
E-mail address: (to be used for future annu-	net al report notification)
For further information concerning this matter, p	please call:
William C. Slabaug L	at (561) 666 - 3443
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	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 605.0114 or 605.0116, 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.

rtoriaa.
1. Name of the limited liability company: Legal Advocates, PUC
2. (a) (b)
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
2424 N. Federal Highway Snite 411 8424 N. Federal Highway, Snike
Boca Raton FC 33431 Boca Raton FC 33431
2/16/16 Date of filing/registration in Florida 4. Document number
3. Date of filing/registration in Florida 4. Document number
5. (a) William C. Slabaugh
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
301 Yamato Road Snite 1240
Boca Raton FL 3343/
(b) William C. Slabaugh.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
Enter name of NEW Registered Agent and/or NEW Registered Office address: 2424 N. Federal Highway, Suite 4//
NEW Registered Office Address:
Boca Raton , FL 3343/
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered
agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the articles of organization or the operating agreement of the limited liability company.
Signature of a member or authorized representative of a member William C. Slabang L Printed or typed name of signee
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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change

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