

PD1000091786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

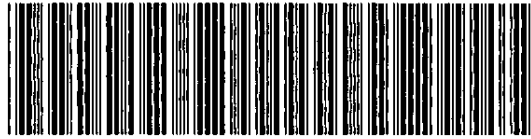
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700237389857

07/16/12--01006--022 **35.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUL 16 PM 2:06

RA/RD/chs
@ 7.16.12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Legal Dept., Inc.
Name of Corporation

DOCUMENT NUMBER: P 0 1 0 0 0 0 9 1 7 8 6

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sandra K. Racicot
Name of Contact Person

The Legal Dept., Inc.
Firm/Company

9105 Sand Shot Way, #4313
Address

Port St. Lucie, FL 34986
City/State and Zip Code

email@thelegaldept.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandra K. Racicot at (321) 213-3780
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Legal Dept., Inc.
2. The principal office address: 9105 Sand Shot Way, # 4313, Port St. Lucie, FL 34986
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/17/2001 Document number: P01000091786
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

NRAI Services, Inc.
515 EAST PARK AVENUE
TALLAHASSEE FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Sandra K. Racicot
9105 Sand Shot Way, #4313
P.O. Box NOT acceptable
Port St. Lucie, FL 34986

12 JUL 16 PM 2:06
DIVISION OF CORPORATIONS
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Sandra K. Racicot
Signature of an officer or director

Sandra K. Racicot, President
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Sandra K. Racicot
Signature of Registered Agent

July 13, 2012
Date

If signing on behalf of an entity:

Typed or Printed Name

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