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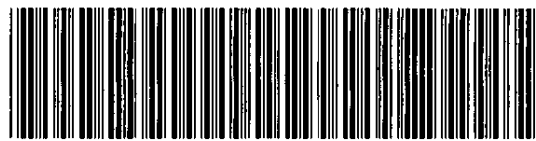
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PP-ADA  
Change  
Sg



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 5, 2009

LISA R. BROOKS  
STRATEGIC LEGAL MANAGEMENT, INC.  
POST OFFICE BOX 18554  
TAMPA, FL 33679-8554

SUBJECT: STRATEGIC LEGAL MANAGEMENT, INC.  
Ref. Number: P06000035916

We have received your document for STRATEGIC LEGAL MANAGEMENT, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert  
Regulatory Specialist II

Letter Number: 209A00026745

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AUG 27 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Strategic Legal Management, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P06000035916

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:

Lisa R. Brooks  
Name of Contact Person

Strategic Legal Management, Inc.  
Firm/Company

P O Box 18554  
Address

Tampa, FL 33679-8554  
City/State and Zip Code

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

For further information concerning this matter, please call:

Lisa R. Brooks at ( 813 ) 728-7737  
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: Strategic Legal Management, Inc.
2. The principal office address: ~~P O Box 18554~~ 3715 W. SANTIAGO ST  
Tampa, FL 33679-8554 TAMPA, FL 33629 *lrb 8/21/09*
3. The mailing address (if different): PO Box 18554  
TAMPA, FL 33679-8554
4. Date of incorporation/qualification: 04/2006 Document number: P06000035916
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)

Strategic Legal Management, Inc. / Lisa R. Brooks

3225 S. MacDill Avenue, Suite 129-231

Tampa, FL 33629

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

Strategic Legal Management, Inc.

3715 W. Santiago St.

P.O. Box NOT acceptable

Tampa, FL 33629

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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.

*Lisa Brooks*  
Signature of an officer or director

Lisa R. Brooks, 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.*

*Lisa Brooks*  
Signature of Registered Agent

07/27/2009

Date

If signing on behalf of an entity:

Lisa R. Brooks

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314