## P090000 41534

(Re	questor's Name)			
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SECRETARY OF STATE

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## **COVER LETTER**

TO:	Amendment Section Division of Corpora				
SUBJECT: Legal Assistant Solutions, Inc.  Name of Corporation					
		Name of C	orporation		
DOCU	JMENT NUMBER:	P090	000047534		
The er	closed Statement of	Change of Registered Office	e/Agent and fee are submi	tted for filing.	
Please	return all correspond	ence concerning this matter	to the following:		
		Christina	Broder		
		Name of Co			
		Tigane of co.			
		Legal Assistant	Solutions, Inc.		
		Firm/Co	ompany		
		871 Montice	ello Avenue		
		Add		<del></del>	
		Davie, Fl City/State ar	L 33325		
	·	City/State ar	id Zip Code		
		tina@legalassista	ntsolutions.com		
	E-mail	address: (to be used for f	uture annual report noti	fication)	
For fu	rther information con	cerning this matter, please of	call:		
	Christir	na Broder	at ( 954 )	306-8949	
	Name of Co	ntact Person	Area Code & Dayt	306-8949 ime Telephone Number	
Enclos	sed is a \$35.00 check	made payable to the Depart	tment of State.		
	Ma	niling Address:	Street Address	:	
	Ar	niling Address: nendment Section	Amendment S	ection	
		vision of Corporations	Division of C	-	
		O. Box 6327	Clifton Buildi		
	Та	llahassee, FL 32314	2661 Executiv Tallahassee, F	ve Center Circle	

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florid inge is submitted for a corporation organized under the laws of the State of	of Florida
· · · · ·	r to change its registered office or registered agent, or both, in the State of	j Fioriaa.
	the corporation: Legal Assistant Solutions, Inc.	
2. The principal	office address: 871 Monticello Avenue	
<u> </u>	Davie, FL 33325	
3. The mailing a	ddress (if different):	
4. Date of incor	poration/qualification: June 5, 2009 Document number:	P09000047534
	d street address of the current registered agent and registered office on file trment of State: (If resigned, enter resigned)	with the
	Christina Broder	
	871 Monticello Avenue	***************************************
	Davie, FL 33325	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered	90 13 13 14 13
	Megan D. Widmeyer, Esq.	SEP SEP
	One E. Broward Boulevard, Suite 700	28 TARY ASSE
	P.O. Box NOT acceptable	— EFF AT CO
	Fort Lauderdale, FL 33301	- FLO
The street address changed will	ess of its registered office and the street address of the business office of be identical.	of its registered agent,
Such change wauthorized by t	as authorized by resolution duly adopted by its board of directors or by he board, or the corporation has been notified in writing of the change.	an officer so
C Signatu	Christina Broder, Printed or typed name a	President
I hereby accept I further agree of my duties, an document is be corporation ha	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and all I am familiar with analycept the obligation of my position as registing filed merely to reflect a change in the registered office address, I have a see that the control of this change.  A 2 Date Date	
· )	chalf of an entity:	
Megan D	Wilneyay P.A.  yped or Printed Name	

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