

P 12000019863

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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

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(City/State/Zip/Phone #)

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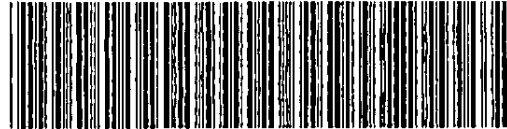
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Legal Support Group Inc.  
Name of Corporation

DOCUMENT NUMBER: P12000019863

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:

Frederic Freeman  
Name of Contact Person

Imarket and Manage Media  
Firm/Company

449 West Silver Star Rd. #405  
Address

Groee, FL 34761  
City/State and Zip Code

Im3QS2@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frederic Freeman at (407) 349-7179  
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: Legal Support Group, Inc.  
 2. The principal office address: 449 W. Silver Star Dr. Ocala, FL 34761  
 3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 9/16/01 Document number: 012000019863

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)

Anthony Smith Law PA.  
5401 S Kirkman Dr. #610  
Orlando, FL 32819

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

FREDERIC FREEMAN (P)  
449 WEST SILVERSTAR RD #405  
Ocala, FL 34761  
P.O. Box NOT acceptable

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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.

[Signature]  
 Signature of an officer or director

Fredoric Freeman Pres  
 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.

[Signature]  
 Signature of Registered Agent

11/6/13  
 Date

If signing on behalf of an entity:

Fredoric Freeman  
 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  
 CR2E045 (03/12)