## P12000041957

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: LEGALINC CORPORATE SERVICES INC.

Name of Corporation

DOCUMENT NUMBER: P12000047957

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:

JENNY CHACON

Name of Contact Person

ATTORNEYS CORPORATE SERVICE INC

Firm/Company

5668 E. 61ST STREET

Address

COMMERCE, CA 90040

City/State and Zip Code

jenny@attorneyscorpservice.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JENNY CHACON

Name of Contact Person

at (800 462-5487 EXT 102 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

		17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of FLORIDA	•
in orde	er to change its registered office or i	registered agent, or both, in the State of Florida.	
1. The name of	the corporation: LEGALINC C	ORPORATE SERVICES INC.	
2. The principal	office address: 311 W. DR. ML	K BLVD., STE 100-B180 TAMPA, FL. 33607	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 5/23/201	2	
	d street address of the current regist rtment of State: (If resigned, enter re	ered agent and registered office on file with the esigned)	
	REGISTERED AGENTS	S INC	
	311 W. DR. MLK BLVD.	., STE 100-B180	
	TAMPA, FL. 33607		ت. وروانيا
6. The name and (if changed):	d street address of the new registere	ad agent (if changed) and /or registered office	ISLOW OF BORNOWN
	Northwest Registered A	gent, LLC.	Section Control
	3030 N. Rocky Point Dr.	. STE 150A	OR 163 H 3
	Tampa, Florida 33607	ox NOT acceptable	F
The street address changed will	ess of its registered office and the s be identical.	street address of the business office of its registered ager	nt,
Such change w authorized by the	as authorized by resolution duly ad he board, or the corporation has be	lopted by its board of directors or by an officer so en notified in writing of the change.	
Hass	ha Siha	Marsha Dasch	
I hereby accept I further agree performance of agent. Or, if th	to comply with the provisions of all my duties, and I am familiar with	Printed or typed name and title ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I ified in writing of this change.	
1/		6/22/2012	
Sig	nature of Registered Agent	Date	
If signing on be	chalf of an entity:		
Dan Keen			
<u>T</u>	yped or Printed Name		

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