## P12000066037

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: LEGAL EL	ITE TITL	E INC	
DOCUMENT NUMB	ER: P1200006603	37		
The enclosed Articles of	of Amendment and fee are su	bmitted for fili	ng.	
Please return all corres	pondence concerning this ma	tter to the follo	wing:	
	Evan Kagan			
-		Name of Co	ontact Persoi	1
-		Firm/ C	Company	
	10620 Griffin Roa			
•	O		dress	
-	Cooper City, FL 3		17' 0 1	
		-	and Zip Cod	e
<u>eva</u>	nkagan@gmail.c			
	E-mail address: (to be us	sed for future a	nnual report	notification)
For further information	concerning this matter, pleas	se call:		
Evan Kagan		at (	954	383-4004
Name o	f Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the I	Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fil Certified ( (Additiona enclosed)	Сору	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314		Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle essee, FL 32301

## Articles of Amendment to Articles of Incorporation of

1	<b>EGAL</b>	FI	ITE	TITI	F	INC
	-	-		1116		$\mathbf{H}$

(Name of Corporation as currently filed with the F	orida Dept. of State)
P12000066037	
(Document Number of Corporation (if	`known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	10620 Griffin Road
(Principal office address MUST BE A STREET ADDRESS)	Suite 102
	Cooper City, FL 33328
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10620 Griffin Road
	Suite 102
	10620 Griffin Road ₩₩ ₩₩
D. If amending the registered agent and/or registered office addraw registered agent and/or the new registered office address  Name of New Registered Agent	ess in Florida, enter the name of the
(Florida str	vet address)
New Registered Office Address: (City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar y  Signature of New Registered Agent.	with and accept the obligations of the position.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith	, /	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	NA	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				_
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

(Attach addition	r adding additiona nal sheets, if negesso	ary). (Be specifi	ic)			
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If an amendment provisions fo	ent provides for an r implementing the	exchange, reclase amendment if no	sification, or c ot contained in	ancellation of the amendme	issued shares, nt itself:	
(if not ap	plicable, indicate N	(A)				
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12/20/2013	
Signature /	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
Evan Kagan	
(Typed or printed name of person signing)	<del></del>
President	
(Title of person signing)	_