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To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : LEGALINC CORPORATE SERVICES INC.
Account Number : I20180000011
Phone : (844)386-0178
Fax Number : (214)317-4754

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**REGISTERED AGENT CHANGE
LCM IMAGING, INC.**

Certificate of Status	0
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Corporate Filing Menu

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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 FL
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LCM IMAGING, INC.
2. The principal office address: 8300 W. Sunrise Blvd. Plantation, FL 33322
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/30/1998 Document number: P98000009600

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)

Corporate Creations Network Inc.

11380 Prosperity Farms Road #221E

Palm Beach Gardens, FL 33410

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

LEGALINC CORPORATE SERVICES INC.

5237 SUMMERLIN COMMONS BLVD, SUITE 400

P.O. Box NOT acceptable

FORT MYERS, FL, US, 33907

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.

Rohit Navani

Signature of an officer or director

Rohit Navani

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.*

Nancy Luna

Signature of Registered Agent

10/11/2019

Date

If signing on behalf of an entity:

Nancy Luna

Typed or Printed Name

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