

P98 00002982

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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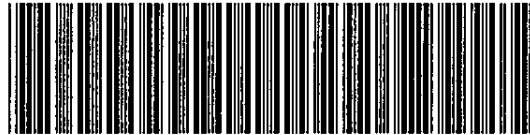
(Business Entity Name)

(Document Number)

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*R. White*

JAN 15 2016

R. WHITE

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Legal Advocate Services, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** PA8000022982

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:

Shawn D. Hardin  
Name of Contact Person

Legal Advocate Services, Inc  
Firm/Company

2405 Mercer Avenue, Ste 305  
Address

West Palm Beach, Fl. 33401  
City/State and Zip Code

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

For further information concerning this matter, please call:

Shawn Hardin at (561) 686-8828  
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 Advocate Services, Inc.  
2. The principal office address: 24105 Mercer Ave, Suite 305  
West Palm Beach, Fl. 33401  
3. The mailing address (if different): Same as above  
4. Date of incorporation/qualification: 8/29/2000 Document number: PG8000022982  
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)

Shawn Hardin  
8001 Palm Beach Lakes Blvd. #208  
West Palm Beach, Fl. 33409

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

Shawn Hardin  
24105 Mercer Avenue, Ste 305  
P.O. Box NOT acceptable  
West Palm Beach, Fl. 33401

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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

Shawn Hardin  
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

1/5/2014  
Date

If signing on behalf of an entity:

Shawn Hardin  
Typed or Printed Name

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