P12000047957

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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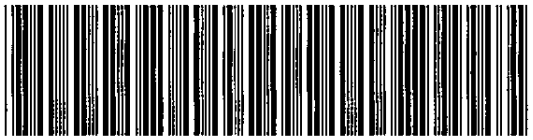

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12 JUL 23 AM 8:43
SECRETARY OF STATE
DIVISION OF CORPORATIONS

RA/RD/ch8
10 7/24/12

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 at (800) 462-5487 EXT 102
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

CR2E045 (03/12)

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: LEGALINC CORPORATE SERVICES INC.

2. The principal office address: 311 W. DR. MLK BLVD., STE 100-B180 TAMPA, FL. 33607

3. The mailing address (if different):

4. Date of incorporation/qualification: 5/23/2012 Document number: P12000047957

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)

REGISTERED AGENTS INC

311 W. DR. MLK BLVD., STE 100-B180

TAMPA, FL. 33607

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

Northwest Registered Agent, LLC.

3030 N. Rocky Point Dr. STE 150A

P.O. Box NOT acceptable

Tampa, Florida 33607

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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.

Marsha Dasch

Signature of an officer or director

Marsha Dasch

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 of Registered Agent

6/22/2012

Date

If signing on behalf of an entity:

Dan Keen

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)