## 10100004807

(Requestor's Name)		
(Address)		
(1001000)		
(Address)		
(City/State/Zip/Phone #)		
•		
PICK-UP WAIT MAIL		
WhiteStar Dronadice LLC		
WhiteStar Properties, LLC 902 Clint Moore Road		
— Suite 220		
Boca Raton, FL 33487		
Certified Copies Certificates of Status		
Octanica copies Octanicates of Status		
Special Instructions to Filing Officer:		
12/10 01 01 01		
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12/10/03--01043--007 \*\*25.00

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Office Use Only

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: Lah.	LeStar Proporties, LLC.
2. The mailing address of the limited liability company	
Saite 220, Boca Rato	
3/26/2001	20 100000 4807
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registered of Florida Department of State:	fice address as shown on the records of the
James E. 6 Name	*
2200 Boca Ra Addres	ton Blod., Suite 220
Boca Raton City, State a	F/ 33431 F 3
6. The name and address of the new registered agent and	l/or office:
James E. B.	shop = = = = = = = = = = = = = = = = = = =
James E. Bis Name 902 Clint Moore	- Road, Su. th 220 55
Florida street address (P.O.	Box NOT acceptable)
Baca Raton FL City, State and	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be id liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company	e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote of wise provided in the articles of organization or
(Signature of a member or authorized representative of a member)	
Tames E. Bishoc	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

**FILING FEE: \$25.00** 

INHS18(10/99)

(Printed or typed name of signee)

(Signature of Registered Agent)