F03000000978

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
,					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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02/12/08--01012--013 **35.00

J8 FEB 12 FO 3: 34 SECRETARY OF STATE ALLAHASSEE, FLORIDA





200 VY est A dams Street, Suite 2007 Chicago, IL 60606 (312) 346-3606 (800) 934-2556 Fax: (312) 346-3607

February 7, 2008

VIA REGULAR MAIL

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

RE: Atlantic Star Intermediaries, Inc.

Dear Sir or Madam:

Enclosed please find a form to change the registered agent/office for the above named referenced in your state. Also enclosed is a check for the required fee. Please file with your office and return evidence to my attention in the enclosed self addressed stamped envelope.

If you have any questions, please don't hesitate to call using our toll free line at 1-800-934-2556.

Thank you.

Encl.

vlinski

an affiliate of National Registered Agents, Inc.

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: Atlantic Star Intermediaries, Inc. (Name of Corporation)					
DOCUMENT NUMBER: F0300000978					
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:					
Angela Gawlinski					
(Name of Contact Person)					
Premier Corporate Services, Inc. (Firm/Company)					
200 West Adams, Suite 2007					
(Address)					
Chicago, IL 60606 (City/State and Zip Code) For further information concerning this matter, please call:					
Angele Caulingli					
Angela Gawlinski at (312) 346-3606 (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

statement of cha	ange is submitted for a corporation org	9502, 607.1508, or 617.1508, Florida Statut ganized under the laws of the State of <u>New Y</u> istered agent, or both, in the State of Florid	York			
1. The name of the corporation: Atlantic Star Intermediaries, Inc.						
2. The principal office address: 11 Hanover Square, 15th Square, New York, NY 10005						
3. The mailing a	address (if different):					
4. Date of incorp	poration/qualification: 2/26/2003	Document number: F030000	00978	3		
	I street address of the current registered timent of State:	d agent and registered office on file with the	;			
	Corporation Service Com	pany				
	1201 Hays Street			\$		
	Tallahassee, FL 32301					
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				08 FEB		
	NRAI Services, Inc.		ARY (12 F	FILED	
	2731 Executive Park Driv		OF S	P မ	-	
	Weston, FL 33331	one)	SHE SHE	: 5 <u>+</u>		
The street addre	ess of its registered office and the stre be identical.	eet address of the business office of its reg	istered a	igent,		
Such change was authorized by the	s authorized by resolution duly adop the board, or the corporation has been	ted by its board of directors or by an offic notified in writing of the change.	er so			
Signatu	ne ou an efficer or director)	John D'Ambrosio - Vice Presid	ent			
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered agent to comply with the provisions of all si d I am familiar with and accept the o ng filed merely to reflect a change in been notified in writing of this chan	and agree to act in this capacity. latutes relative to the proper and complete bligation of my position as registered age the registered office address, I hereby con ge.	e perfori ent. Or nfirm the	nance if this at the	?	
. (Sig	hature of Registered Agent)	$\frac{2/7/08}{\text{(Date)}}$				
If signing on bel	U half of an entity:					
Angela Ga	wlinski-Asst. Secretary					

* * * 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 (8/05)

(Typed or Printed Name)