

G46185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Starlings Fuel Service  
Name of Corporation

**DOCUMENT NUMBER:** G46185

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:

Barbara Van Boskerck Trustee  
Name of Contact Person

Starlings Fuel Service  
Firm/Company

2754 Rosselle St  
Address

Jacksonville, FL 32205  
City/State and Zip Code

starlingsfuel@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marcia Whitley VanBoskerck 904 384-6113  
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: Starlings Fuel Service Inc  
2. The principal office address: 2754 Rosselle St  
3. The mailing address (if different): \_\_\_\_\_  
4. Date of incorporation/qualification: 1983 Document number: G46185

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)

LeRoy C. Van Baskerck - Resigned  
2754 Rosselle St  
Jacksonville FL 32205

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

Barbara Van Baskerck  
2754 Rosselle St  
Jacksonville FL 32205

P.O. Box NOT acceptable

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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] Secretary  
Signature of officer or director

Marcia Van Baskerck  
Printed or typed name and title  
Corporate Secretary

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.

Barbara Van Baskerck  
Signature of Registered Agent

8/18/09  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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 (8/05)