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COVER LETTER

| TO: Registration Section Division of Corporations | | |
|--|---|------------------|
| SUBJECT: Five Star Enterprises, L (Name of I | L.L.C. Limited Liability Company) | |
| Dear Sir or Madam: | | |
| The enclosed Registered Agent/Registered (| Office Change and fee(s) are submitted for filing. | |
| Please return all correspondence concerning | g this matter to the following: | |
| David B. Pleat, Esq. | | |
| (Name of Person) | | 230 |
| Pleat & Perry, P.A. (Firm/Company) | LLAHAS | :6 WW 12 NNT LOG |
| 4477 Legendary Drive, Suite 202 | RY OF S | R |
| (Address) | | 9: 52 |
| Destin, Florida 32541 | | |
| (City/State and Zip Code) | | |
| For further information concerning this matter. | | |
| Mae D. Hariess | at (850) 897-5293 | , , |
| (Name of Person) | (Area Code & Daytime Telephone Nu | imber) |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | |
| Enclosed is a check for the following | ing amount: | |
| ✓ \$25 Filing Fee | \$55 Filing Fee & Certified Copy | |

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 limite | ed liability compa | ny is: Five Star | Enterprises, L.L.C. | |
|--|--|--|---|---|
| 2. The mailing address o | f the limited liabi | lity company is: | P.O. Box 5081, Nic | eville, Florida 32578 |
| January 19, 2001 3. Date of filing/registrat | tion in Florida | | L01000001025 4. Document numb | per |
| 5. The name of the regist Florida Department of | State: | e registered office ontaine, Esq. Name | | |
| | Destin, Florid | ary Drive, Suit Address a 32541 City, State and 2 | lip | 2007 JUN 21 A SECRETARY O TALLAHASSEE |
| 6. The name and address | David B. Plea | at, Esq. Name ary Drive, Suite | | AM 9: 52 OF STATE E.FLORIOA |
| | Destin . (| FL 325 City, State and Zi | | |
| If the limited liability corconfirmed that after the cand the business office of liability company, it is he of the members of the lift or the operating agreeme (Signature of a member or author) | mpany is not organ hange or changes of the registered ag creby confirmed the nited liability con not of the limited liability | nized under the la are made, the Flo ent will be identi hat the change(s) npany or as other iability company. | aws of the State of Floorida street address of cal. Or, in the case of was/were authorized wise provided in the | f the registered office f a Florida limited by an affirmative vote |
| (Printed or typed name of signee I hereby accept the apportunity with the provision and I am familiar with a Chapter 608, F.S. Ox. if address, I hereby confirm (Signature of Registered Agent) | • | ered agent and ag elative to the pro gations of my pos being filed to mer liability company | ree to act in this cape per and complete per ition as registered as ely reflect a change i has been notified in v | acity. I further agree to formance of my duties, ent as provided for in n the registered office writing of this change. |

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00 David Brand Pleat*
Amy A. Perry†**
William J. "West" Ritchie

Wesley T. Fontaine 0**
John B. Fuller III
Mark E. Nichols
Winter E. Spires

*Also Admitted In DC & MD

**Also Admitted In GA

\$\text{\$\Omega\$} Also Admitted in AL

\$\Omega\$ Also a Supreme Court Certified Mediator



4477 Legendary Drive Suite 202 Destin, Florida 32541 Tel: 850.650.0599

Fax: 850.650.4402

Email: law@pleatperry.com Website: www.pleatperry.com

June 18, 2007

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Five Star Enterprises, L.L.C.

Dear Sir or Madam:

Enclosed please find a Statement of Change of Registered Agent regarding Five Star Enterprises, L.L.C. Also enclosed is our firm's check no.: 10433 in the amount of Twenty five and 00/100 Dollars (\$25.00) which represents payment of the filing fee for the Statement of Change. Please forward all future correspondence regarding Five Star Enterprises, L.L.C. to our office.

Should you have any questions, please contact me.

David B. Pleat

truly yours,

DBP/jef
Enclosures
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