

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000029975

FILED
Apr 25, 2008
Secretary of State

Entity Name: WHITE STAR INVESTMENTS, L.L.C.

Current Principal Place of Business:

513 SANDY OAK DR.
PENSACOLA, FL 32506

New Principal Place of Business:

TBD
PENSACOLA, FL 32506

Current Mailing Address:

513 SANDY OAK DR.
PENSACOLA, FL 32506

New Mailing Address:

417 MAIN ST
VILLA RICA, GA 30180

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

STOVER, ROBERT CHARLES
513 SANDY OAK DR.
PENSACOLA, FL 32506 US

Name and Address of New Registered Agent:

PAGOTTI, NICK
842 RAYMOND ST
MIAMI, FL 33141 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: NICK PAGOTTI

04/25/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: STOVER, ROBERT C
Address: 513 SANDY OAK DR
City-St-Zip: PENSACOLA, FL 32506

Title: MGRM (X) Delete
Name: STOVER, CLAUDIA J
Address: 513 SANDY OAK DR
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SMITH, A
Address: 417 MAIN ST
City-St-Zip: VILLA RICA, GA 30180

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: A SMITH

MGR

04/25/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date