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(Requestor's Name)	
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PICK-UP WAIT MAIL	
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(D. 1	
(Business Entity Name)	
(Document Number)	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer	
Special Instructions to Filing Officer:	

A. LUNT

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EXAMINER

Office Use Only



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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJÈCT: STELLA DEL MAI (Name of Limit	R, LLC ted Liability Company)		
Dear Sir or Madam:			•
The enclosed Registered Agent/Registered Office	e Change and fee(s) are subm	itted for filing.	
Please return all correspondence concerning this	matter to the following:		
R. Carlton Ward			
(Name of Person)			
Richards Gilkey Fite Slaug	hter Pratesi & Ward	d, PA	
(Firm/Company)		TA _s	
1253 Park Street		JUL -7 JRETARY AHASSEI	
(Address)	The state of the s	SSE	
Clearwater, FL 33756		FIST -	O
(City/State and Zip Code)		P 1: 31 OF STATE E. FLORIDA	
For further information concerning this matter, p	please call:		
R Carlton Ward at (Name of Person)	(Number)
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 323		
Enclosed is a check for the following a	mount:		
\$25 Filing Fee	S55 Filing Fee & Cert	tified 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 limited liability company is:STELLA DEL MARK, LLC
2. The mailing address of the limited liability company is:
28100 US Highway 19 N., Suite 311, Clearwater, FL 3376
24 (22 (22 22 22 22 22 22 22 22 22 22 22 2
3. Date of filing/registration in Florida L03000011891 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Jawdet I. Rubaii P.A.
Name
1358 S. Missouri Avenue Address
Address Clearwater, FL 33756 City, State and Zip 6. The name and address of the new registered agent and/or office:
R. Caliton wald '! U
Name Si ::
1253 Park Street
Florida street address (P.O. Box NOT acceptable)
Clearwater FL 33756
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
(Signature of a member or authorized representative of a member)
Julius J. Szabo
(Printed or typed name of signee)
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.
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00