

# L05000007787

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

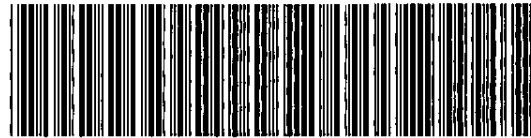
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER  
SEP 06 2011

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Sea Star Realty, LLC  
(Name of Corporation)

**DOCUMENT NUMBER:** L05000007787

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:

Michael Whipple  
(Name of Contact Person)

Sea Star Realty, LLC  
(Firm/Company)

2028 S. Hwy. 53 Ste. 3 PMB 292  
(Address)

La Grange, KY 40031  
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Whipple at ( 502 ) 327-3301  
(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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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. Name of the limited liability company: Sea Star Realty, LLC

2. (a) Principal office address of limited liability company: 575 N. Apollo Blvd.

(Note: **MUST BE STREET ADDRESS**)

Melbourne FL 32935

(b) Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

2028 S. Hwy 53 Ste. 3 PMB292  
La Grange, KY 40031

1/25/2005

L05000007787

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Michael C. Whipple

Registered Office Address:

2740 SW Martin Downs Blvd #199  
Palm City FL 34990

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

**NEW** Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

575 N. Apollo Blvd.

Melbourne, FL 32935

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.

Michael C. Whipple  
Signature of a member or authorized representative of a member

Michael C. Whipple, Manager  
Printed or typed name of signer

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.

Michael C. Whipple  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32316

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA  
DIVISION OF STATE  
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TALLAHASSEE, FLORIDA