2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Feb 27, 2009
Secretary of State

DOCUMENT# L07000010728

Entity Name: STAR 1, LLC

Current Principal Place of Business:

2152 14TH CIRCLE N.
ST. PETERSBURG, FL 33713

New Principal Place of Business:

Current Mailing Address:

2152 14TH CIRCLE N.
ST. PETERSBURG, FL 33713

New Mailing Address:

1148 BARKLEY LANE
BIRMINGHAM, AL 35242

FEI Number: 30-0400458 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

HINES, J. BRADFORD
100 FIRST AVENUE S.
SUITE 301N
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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: BRAD HINES

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: CLARK H. SCHERER, II, I TRUST
Address: 2152 14TH CIRCLE N.
City-St-Zip: ST. PETERSBURG, FL 33713

Title: MGRM (X) Delete
Name: CREEL, JON R SR.
Address: 1148 BARKLEY LANE
City-St-Zip: BIRMINGHAM, AL 35244

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: CREEL, JON R SR
Address: 1148 BARKLEY LANE
City-St-Zip: BIRMINGHAM, AL 35242

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: JON R CREEL SR MGRM 02/27/2009

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