## 110000042581

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D. BRUCE

MAY 10 2010

**EXAMINER** 

## COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: AMERICAN STAR REAL TY LLC  Name of 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 this matter to the following:		
FA1HIMA K. MASUD  Name of Person		
AMERICAN STAL REALTY LLC		
Firm/Company  4-618 1 57 STREET N 301 B  Address 5		
ST PETERSBURG, FL 33703  City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
FA7HIMA MASUD at 727, 289 - 8528  Name of Person  Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section		
Division of Corporations Division of Corporations		
Clifton Building P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee & Certified Copy		

INHS18 (5/08)

## 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: AMERIC	CAN STAR REALTY LLC
<ol> <li>Name of the limited liability company: AMERIC</li> <li>(a) Principal office address of limited liability compan</li> </ol>	y: 4618 IST STREET N
(Note: MUST BE STREET ADDRESS)	301 B ST PETERS BURG, FL 33703
(b) Mailing address of limited liability company:	****
(Note: MAY BE POST OFFICE BOX)	- SAME AS ABOVE -
APRIL 22, 2010	L1000042581
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:	FATHIMA K. MASUD
Registered Office Address:	3911 HARRISBURG ST NE ST PETERSBURG, FL 33703
(b) Enter name of <u>NEW Registered Agent and/or NE</u> <u>NEW Registered Agent:</u>	N/A
	WREGISTER OTHER AUDITESS.  W/A  4618 1 <sup>ST</sup> STREET N
(MUST BE FLORIDA STREET ADDRESS)	301 B 57. PETERS BURG ,FL 33703
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(so the members of the limited liability company or as othe or the operating agreement of the limited liability company	laws of the State of Florida, it is hereby Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization y.
Signature of a member or authorized representative of a member	- 7
EATHIMA K. MASUD	79 <b>3</b> m
Printed or typed name of signee  I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pr and I am familiar with and accept the obligations of my pa Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	

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

Signature of Registered Agent