L100000042581

(Reques	tor's Name)				
(Address)					
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PICK-UP	WAIT MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					
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SECRETARY OF STATE
CALLAHASSEE FI OBJECT.

J. SAULSBERRY EXAMINER OCT 4 2010

COVER LETTER

TO: Registration Section

INHS18 (5/08)

Di	vision of Corporations				
SUBJEC [*]	r∙ An	nerican	Star Realt	y LLC	
SCHOLO			I Liability Con		
Dear Sir o	or Madam:				
The enclo	sed Registered Agent/Registere	d Office (Change and fe	e(s) are submitted for	filing.
THE CHOIC	sed Registered Agent Registere	u Office	Change and re	o(s) are submitted for	
Please ret	urn all correspondence concerni	ng this m	atter to the fo	llowing:	
	•				
	Fathima K Masud				
	Name of Person				DIO OCT -1 SECRETAR CALLAHASS
	American Star Realty LI	C			
	Firm/Company				S 45
					177
	:		·· •		77 7
	5372 4th Street N, Unit 2	217			. Log #:
	Address Address	y not, and	राज्यालय है।		PH 4: 10
	,		•		
	St Petersburg, FL 3370	١٥.			
	City/State and Zip Code)3		• •	
٠	City/State and Zip Code		•		
	·				
	americansrealty@yahoo. address: (to be used for future annual rep	com			
E-mail	address: (to be used for future annual rep	ort notiticati	on)		
For furthe	er information concerning this m	atter nle	ase call·		
roi iuiuk	intormation concerning this in	iattor, pic	ase can.		
				·	
	Fathima K Masud	at (_	10:00_)	727-289-8528	3
	Name of Person		Area Co	de & Daytime Telephone Nu	mber
' © "	TREET/COURIER ADDRESS:		MATEIN	T ADDDESS.	
	egistration Section		MAILING ADDRESS: Registration Section		
	ivision of Corporations		Division of Corporations		
	lifton Building		P.O. Box 6327		
	661 Executive Center Circle		Tallahassee, Florida 32314		
Ta	allahassee, Florida 32301				
E	nclosed is a check for the follo	wing am	ount:		
, .	\$25 Filing Fee	ii ii ard			
	323 rinng ree		▼ \$22 LIII	ng Fee & Certified Co	рy

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:	American Star Rea	Ity LLC		
2. (a) Principal office address of limited liability compar	ny: 4618 1s	t Street N, 301B		
(Note: MUST BE STREET ADDRESS)				
,	St Petersburg, FL 33	3703		
(b) Mailing address of limited liability company:	4618 1st Stre	et N, 301B		
(Note: MAY BE POST OFFICE BOX)	St Petersburg, FL 33	3703		
04/21/2010	L10000	042581		
3. Date of filing/registration in Florida	4. Document number	4. Document number		
5. (a) Registered Agent and Registered Office shown of	n the records of the Florid	la Dept. of State:		
Registered Agent:	Fathima K Masud			
Registered Office Address:	4618 1st Street N, 301B			
	St Petersburg, FL 33	3703		
(b) Enter name of NEW Registered Agent and/or N	EW Registered Office ac	<u>idress</u> :		
NEW Registered Agent:	***			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5372 4th Street N. L	5372 4th Street N. Unit 217		
	St Petersburg	,FL <u>33703</u>		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as oth or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Fathima K Masud Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my pand I chapter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability company.	Florida street address of the ntical. Or, in the case of section (s) was/were authorized between provided in the art ny.	the registered office a Floridadimited by an affirmative vote ficles of organization ASSEE, FLORIDADIC STATE OF ST		
Signature of Registered Agent				

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