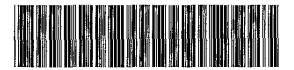
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Office Use Only



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DIVISION OF CORPORATIONS

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COVER LETTER

| Division of Corporations |
|---|
| SUBJECT: 5 TAR TRANSPORTATION MANAGEMENT INC (Name of Corporation) |
| DOCUMENT NUMBER: PO 1 000 105 685 |
| The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| Robert T. Gaye (Name of Person) |
| STAR TRANSPORTATION MANAGEMENT TNC. (Name of Firm/Company) |
| 9388 Sidney Hayes food |
| OR CAMPO FC 32824 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Robert T. Gaye at (407) 888 - 5530 (Name of Person) (Area Code & Daytime Telephone Number) |

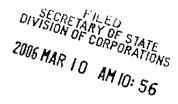
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

TO:

Amendment Section



RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

| Florida Statutes, the undersigned, KINGS (COY A. BLAIR Ja (Name of Registered Agent) |
|---|
| hereby resigns as Registered Agent for STAR TRANSPORTATION MANAGEMENT, TO (Name of Corporation) |
| P01000105685 (Document Number, if known) |
| A copy of this resignation was mailed to the above listed corporation at its last known address. |
| The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. |
| (Signature of Resigning Agent) |
| If signing on behalf of an entity: |
| Kings (4 A. BLAIR Jr. (Typed or Printed Name) |
| Director |

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314