T0200085438

(Requestor's Name)				
(Address)				
(Address)	_			
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)	_			
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COVER LETTER

TO:	Amendment Section Division of Corporations					
SUBJECT: STP REDEVELOPMENT II, INC. (Name of Corporation)						
DOCUMENT NUMBER: P02000085438						
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
Please	return all correspondence concerning this matter to the	ne following:				
	Joel B. Giles					
	(Name of Contact	Person)				
Carlton Fields, P.A. (Firm/Company)						
	(Firm/Compa	ny)				
	200 Central Avenue, Suite 2300					
(Address)						
St. Petersburg, Florida 33701-4352						
	(City/State and Zip Code)					
For furt	ther information concerning this matter, please call:					
Joel B.	Giles	, 727				
JOEI D.	(Name of Contact Person) at	(727) 821-7000 (Area Code & Daytime Telephone Number)				
Enclosed is a \$35.00 check made payable to the Department of State.						
	Mailing Address: Amendment Section	Street Address: Amendment Section				
	Division of Corporations	Division of Corporations				
	P.O. Box 6327	Clifton Building				
	Tallahassee, FL 32314	2661 Executive Center Circle				
		Tallahassee, FL 32301				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.05 ange is submitted for a corporation orgo		
-	er to change its registered office or regis		
1. The name of	the corporation: STP REDEVELOPME	NT II, INC.	
	office address: 2325 Ulmerton Road, S		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 08/07/2002	Document number: P020000	085438
5. The name and	d street address of the current registered rtment of State:		
	GREGORY S. SEMBLER		_
	5858 CENTRAL AVENUE		1~2
	ST. PETERSBURG FL 33707 U	J.S.	ALC:
6. The name and (if changed):	d street address of the new registered ag	ent (if changed) and /or registered offi	SKY J
	CFRA, LLC	_	Tro Pr
	Corporate Center Three at Int		PH 4: 28 OF STATE EE, FLORIDA
	(P.O. Box NOT acceptable 4221 W. Boy Scout Boulevard, Suit	e 1000, Tampa, Florida 33607-5736	1
The street addreas changed will	ess of its registered office and the stree l be identical.	et address of the business office of its	s registered agent,
Such change was authorized by the	as authorized by resolution duly adopt he board, or the corporation has been r	ed by its board of directors or by an notified in writing of the change.	officer so
(Signate	ure of an officer or director	Fred B. Bullard, Jr., President (Printed or typed name and to	-01-1
I hereby accept I further agree of my duties, ar document is bet corporation ha	t the appointment as registered agent a to comply with the provisions of all sta nd I am familiar with and accept the ol ing filed merely to reflect a change in t s been notified in writing of this chang	ind agree to act in this capacity, atutes relative to the proper and com bligation of my position as registered the registered office address, I hereb te.	plete performance d agent. Or, if this by confirm that the
1/2	10,6	12/15/2008	
	gnature of Registered Agent)	(Date)	
	chalf of an entity:		**
Joel B. Giles	Typed or Printed Name)		
	* * * PH IN/ E	7FF- \$35 00 * * *	

Make Checks Payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)