## P04000087073

(Requestor's Name)				
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(Business Entity Name)				
(Document Number)				
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations			
SUBJ	ECT: Tri-Star Advisors, Inc. (Name of Co	orporation) +		
DOCU	MENT NUMBER: <u>P0400087073</u>			
The en	closed Statement of Change of Registered Office	Agent and fee are submitted for filing.		
Please	return all correspondence concerning this matter	to the following:		
Douglas J. Hannah (Name of Contact Person)				
	(Name of Con	itact Person)		
Tri-Star Advisors, Inc.				
	(Firm/Co	mpany)		
	6900-29 Daniels I	Parkway, Suite 202		
	Ft. Myer (City/State an	s, FL 33912 d Zip Code)		
For fu	ther information concerning this matter, please c	all:		
	Kelly Felts (Name of Contact Person)	_at ( <u>239</u> ) 694-3300 (Area Code & Daytime Telephone Number)		
Enclos	ed is a \$35.00 check made payable to the Departs	ment of State.		
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		
	· · · · · · · · · · · · · · · · ·	Tallahassee FL 32301		

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Sta ange is submitted for a corporation organized under the laws of the State of Fl er to change its registered office or registered agent, or both, in the State of Flo	orida
1. The name of	the corporation: Tri-Star Advisors, Inc.	
2. The principal	office address: 12801 Wesklinks Drive, Suite 106 Ft. Myers, FL 3	
3. The mailing a	address (if different): 6900-29 Daniels Parkway, Suite 202 Ft. Myer	s, FL 33912
4. Date of incor	poration/qualification: 6/3/04 Document number: P040000	087073
	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)	the
	Douglas J. Hannah	SEC SEC
	6632 Trail Blvd	EC 22 AHASSI
	Naples, FL 34108	SSFF.
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offic	*** 1 ********************************
	Douglas J. Hannah	Sm.
	12801 Westlinks Drive, Suite 106 (P.O. Box NOT acceptable)	
	Ft. Myers, FL 33913	
The street address changed will	ess of its registered office and the street address of the business office of its lbe identical.	registered agent,
Such change w authorized by t	as authorized by resolution duly adopted by its board of directors or by an one board or the corporation has been notified in writing of the change.	officer so
(Signal	ure of an officer or director)  Jouglas Hannah (Printed or typed name and titl	<u>Officer/Director</u>
Corporation na.	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comply of a lam familiar with and accept the obligation of my position as registered in a registered in gilled merely to reflect a change in the registered office address, I hereby s been potified in writing of this change.	plete performance agent. Or, if this confirm that the
If signing on be	ehalf of an entity:	
Dond las	Typed or Printed Name)	

\* \* \* FILING FEE: \$35.00 \* \* \*