P04000/11972

| • |
|---|
| (Requestor's Name) |
| • |
| (Address) |
| , |
| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Dusiless Ellity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



800109084348

09/12/07--01011--004 **35.00

09/12/07--01011--005 ***8.75

Ro ch



T. Reberts SEP 18 2007

September 6, 2007

Re: P04000111972 Leadstar, Inc,

Please send a certified copy of registration of this company. If you have any questions, please call (954) 661-8714. Enclosed is a check for \$8.75.

Our new address is: 2200 N. Florida Mango Road Bay 8 West Palm Beach, FL 33409

800109084348 09/12/07--01011--005 ***8.75

Our OLD address: 2758 W. Atlantic Blvd #30 Pompano Beach, FL 33401

Please send to new address ASAP!

Thank you VERY much!

Corey Schwartz

President

COVER LETTER

| TO: Amendment Section Division of Corporations | |
|---|--|
| SUBJECT: Leadstar Inc (Name of C | orporation) |
| DOCUMENT NUMBER: | |
| The enclosed Statement of Change of Registered Office | e/Agent and fee are submitted for filing. |
| Please return all correspondence concerning this matter | to the following: |
| Corey Schwartz | |
| (Name of Con | ntact Person) |
| Leadstar Inc (Firm/Co | amony) |
| (Fillibec | mpany) |
| 224 Datura Street #1314 | resc) |
| (Add | 1055) |
| West Palm Beach, FL 33401 (City/State ar | nd Zip Code) |
| For further information concerning this matter, please of | cali: |
| Corey Schwartz | at (954) 661-8714 (Area Code & Daytime Telephone Number) |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a \$35.00 check made payable to the Depart | 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

| • | rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this | |
|--|---|-------|
| | ge is submitted for a corporation organized under the laws of the State of Florida | |
| in order | to change its registered office or registered agent, or both, in the State of Florida. | |
| | e corporation: Leadstar Inc | |
| | ffice address: 2200 Florida Mango Road #8 | |
| West Palm Be | each, FL 33409 | |
| 3. The mailing add | dress (if different): 224 Datura Street #1314 | |
| West Palm Bea | ach, FL 33401 | |
| 4. Date of incorpo | pration/qualification: S-4-by Document number: P04030111972 | |
| 5. The name and s Florida Departn | street address of the current registered agent and registered office on file with the ment of State: | |
| C | Corey Schwartz | |
| | 224 Datura Street #1314 | |
| <u>v</u> | West Palm Beach, FL 33401 | |
| 6. The name and s (if changed): | street address of the new registered agent (if changed) and /or registered office | • |
| (| Corey Schwartz | |
| 2 | 2200 Florida Mango Road #8 | |
| _ | (P.O. Box NOT acceptable) | |
| <u>v</u> | West Palm Beach, FL 33409 | |
| The street address as changed will be | s of its registered office and the street address of the business office of its registered agent, be identical. | |
| Such change was authorized by the | authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change. | , |
| | Core Schunte 105. de | _ / |
| I hereby accept the I further agree to of my duties, and document is being | to an officer or director) the appointment as registered agent and agree to act in this capacity. It comply with the provisions of all statutes relative to the proper and complete performance and familiar with and accept the obligation of my position as registered agent. Or, if this given the proper and complete performance are filled merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change. | |
| | | |
| (Signa | ature of Registered Agent) (Date) | |
| If signing on beha | alf of an entity: | |
| (Тур | ped or Printed Name) | |
| | * * * FILING FEE: \$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)