

P06000036342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

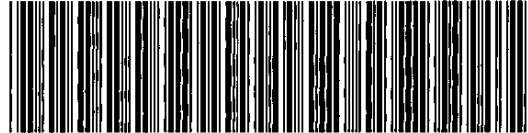
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 AUG 18 AM 8:31

FILED

08/18/06--01002--023 \*\*35.00

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Interstellar Productions Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** CR2E045

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kenneth Smith  
(Name of Contact Person)

Interstellar Productions, Inc.  
(Firm/Company)

4016 Island Bay Circle  
(Address)

Sanford, FL 32771  
(City/State and Zip Code)

For further information concerning this matter, please call:

Kenneth Smith at ( 407 ) 435-1211  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 7, 2006

Kenneth Smith  
Interstellar Productions, Inc.  
4016 Island Bay Circle  
Sanford, FL 32771

SUBJECT: INTERSTELLAR PRODUCTIONS INCORPORATED  
Ref. Number: P06000036342

We have received your document for INTERSTELLAR PRODUCTIONS INCORPORATED, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne  
Senior Section Administrator

Letter Number: 006A00049082

RECEIVED  
06 AUG 17 AM 8:00  
DIVISION OF CORPORATIONS

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change 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.

1. The name of the corporation: Interstellar Productions, Inc.  
2. The principal office address: 4016 Island Bay Circle  
Sanford, FL 32771  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 02/06 Document number: \_\_\_\_\_

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Business Filings Incorporated  
1203 Governor's Square Blvd. Suite 101  
Tallahassee, FL 32301-2960

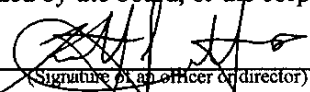
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Kenneth Smith  
4016 Island Bay Circle  
(P.O. Box NOT acceptable)  
Sanford, FL 32771

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

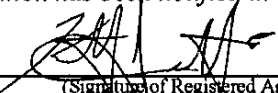
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

Kenneth Smith  
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

  
(Signature of Registered Agent)

08/04/06  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed 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