P06000085660

| (Re | equestor's Name) | | | |
|---|-------------------|-----------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Nan | ne) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only

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SCUNLIANSEE, FLORIDA

COVER LETTER

| FO: Amendment Section Division of Corporations | | | |
|--|---|--|--|
| SUBJECT:FLOR | DA ELITE ALL-STA | | |
| DOCUMENT NUMBER: P060 | 00085660 | | |
| The enclosed Statement of Change | of Registered Office/Agent | and fee are submitted for filing. | |
| Please return all correspondence cor | ncerning this matter to the fo | ollowing: | |
| | CHARLES E. MO | ORE | |
| (Name of Contact Person) | | | |
| FL | ORIDA ELITE ALL-S (Firm/Company) | STARS, INC. | |
| | 6221 MERCADO DI | RIVE | |
| | (Address) | | |
| | JACKSONVILLE, FL (City/State and Zip C | | |
| For further information concerning | • | • | |
| CHARLES E. MC (Name of Contact Po | oore at (| 904 673-8373 Area Code & Daytime Telephone Number) | |
| Enclosed is a \$35.00 check made pa | yable to the Department of | State. | |
| P.O. Box | nt Section f Corporations | Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | |

TO:

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

4

| statement of cha | · | , 607.1508, or 617.1508, Florida Statutes, this zed under the laws of the State of FLORIDA red agent, or both, in the State of Florida. | |
|--|---|--|--------------------------------|
| | the corporation: FLORIDA ELITE ALL-S | - | |
| | office address: 6221 MERCADO DRIV | | |
| 3. The mailing a | address (if different): P.O. BOX 37242, | JACKSONVILLE, FL 32236 | |
| 4. Date of incor | poration/qualification: 06/26/2006 | Document number: P06000085660 | |
| | d street address of the current registered agreement of State: | ent and registered office on file with the | , |
| | CHARLES E. MOORE | | |
| | 121 WEST FORSYTH STRE | EET, SUITE 170 | |
| | JACKSONVILLE, FL 32202 | | |
| 6. The name and (if changed): | d street address of the new registered agent | (if changed) and /or registered office | FILED DO |
| | CHARLES E. MOORE | - Section of the sect | ST E |
| | 6221 MERCADO DRIVE | Ly. | 6 |
| | (P.O. Box NOT acceptable) | | 23 |
| | JACKSONVILLE, FL 32210 | | 7 |
| | | address of the business office of its registered | agent, |
| Such change w authorized by t | as authorized by resolution duly adopted he board, or the corporation has been not | by its board of directors or by an officer so ified in writing of the change. | |
| Cole (Signal | ure of an officer of director) | CHARLES E. MOORE, PRESIDENT | <u>r</u> |
| I hereby accept I further agree of my duties, ar document is be corporation ha | the appointment as registered agent and to comply with the provisions of all statu ad I am familiar with and accept the obli ing filed merely to reflect a change in the s been notified in writing of this change. | l agree to act in this capacity. Ites relative to the proper and complete perfor gation of my position as registered agent. Or, registered office address, I hereby confirm th | rmance , if this hat the |
| Cha | Le E. Hom | 08/03/2006 | |
| (Si | gnature of Registered Agent) | (Date) | |
| If signing on be | chalf of an entity: | | |
| | Typed or Printed Name) | | |
| | * * * FILING FE | E: \$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)