

P/40000 72997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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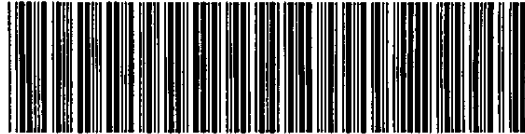
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
15 MAR 27 AM 11:55

APR 02 2015
T. CARTER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 19, 2015

JEFF BOOTY
FIVE STAR INVESTIGATIONS, INC.
3229 TROUT CREEK COURT
ST AUGUSTINE, FL 32092 US

SUBJECT: FIVE STAR INVESTIGATIONS INC.
Ref. Number: P14000072997

RECEIVED
15 APR - 1 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for FIVE STAR INVESTIGATIONS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An officer/director must sign the document authorizing the change(s). - *COMPLETED*

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Carter
Regulatory Specialist

Letter Number: 815A00005560

COVER LETTER

TO: . Amendment Section
Division of Corporations

SUBJECT: FIVE STAR INVESTIGATIONS INC.
Name of Corporation

DOCUMENT NUMBER: P14000072997

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:

JEFF BOOTY

Name of Contact Person

FIVE STAR INVESTIGATIONS, INC.

Firm/Company

3229 TROUT CREEK COURT

Address

ST AUGUSTINE, FL 32092

City/State and Zip Code

JB@FIVE-STAR-INVESTIGATIONS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEFF BOOTY

Name of Contact Person

at (904) 625-7100

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

**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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FIVE STAR INVESTIGATIONS INC.
2. The principal office address: 3229 TROUT CREEK CT ST. AUGUSTINE, FL 32092
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/02/2014 Document number: P14000072997
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) _____

BUSINESS FILINGS INCORPORATED

515 E. PARK AVE TALL., FL 32301

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

IncSmart Florida Inc.

4865 47th Place Vero Beach, FL 32967

P.O. Box NOT acceptable

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.

JA. Booty
Signature of an officer or director

3/29/15

JEFF BOOTY, PRESIDENT
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]
Signature of Registered Agent

03/10/2015

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
CR2E045 (03/12)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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