

P9500000177

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SECRETARY OF STATE  
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13 MAY 24 AM 9:28

Handwritten notes: P9500000177, 5-28-13

Conti J. Moore, Esq.  
Tamar K. Gelin, Esq.

**CONTI MOORE**  
Law, PLLC

124-A East Colonial Dr.  
Orlando, FL 32801  
Telephone: (407) 831-0203  
Facsimile: (407) 442-3404

May 20, 2013

Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Statements of Change of Registered Agent

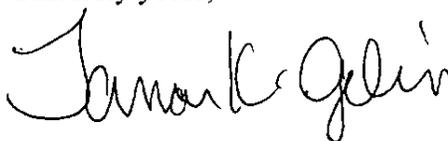
Dear Sir or Madam:

For filing, please find enclosed the following documents:

1. Statement of Change of Registered Agent – Star Taxi, Inc.
2. Statement of Change of Registered Agent – Star Parking Solutions, Inc.
3. Statement of Change of Registered Agent – Transtar Transportation Group Inc.
4. Check No. 1125 in the amount of \$105.00

If you have any questions or comments, please do not hesitate to contact this office.  
Thank you for your anticipated prompt attention and assistance in this matter.

Sincerely yours,



Tamar K. Gelin, Esq.

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Star Taxi, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P95000000177

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:

Conti J. Moore, Esquire  
Name of Contact Person

Conti Moore Law, PLLC  
Firm/Company

124-A East Colonial Drive  
Address

Orlando, Florida 32801  
City/State and Zip Code

Conti@contimoorelaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Conti J. Moore at ( 407 ) 831-0203  
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

**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: Star Taxi, Inc.

2. The principal office address: 404 Zell Drive, Orlando, Florida 32824

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 01/03/1995 Document number: P9500000177

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)

Robert T. Gaye  
404 Zell Drive  
Orlando, Florida 32824

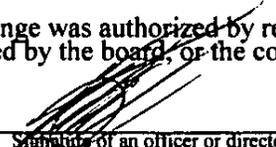
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Conti J. Moore, Esquire  
Conti Moore Law, PLLC  
P.O. Box NOT acceptable  
124-A East Colonial Drive, Orlando, Florida 32801

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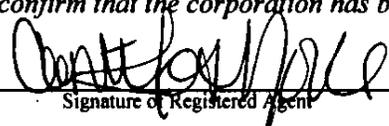
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Robert T. Gaye, 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 of Registered Agent

5/16/13  
\_\_\_\_\_  
Date

If signing on behalf of an entity:  
\_\_\_\_\_  
Typed or Printed Name

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