1122/2019

Florida Department of St Division of Corporations Electronic Filing Cover Sheet 257

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 fax Number : (888)706-7274

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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JUL 2 3 2019

## REGISTERED AGENT CHANGE SEA STAR LINE AGENCY, INC.

Certificate of Status	0
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Sea Star Line Agency, Inc.
Name of Corporation

P97000095257

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:

## Margot Mullin

Name of Contact Person

Registered Agent Solutions, Inc.

1701 Directors Blvd, Ste 300

Address

Austin, TX 78744

City/State and Zip Code

notices@rasi.com

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

For further information concerning this matter, please call:

Margot Mullin

at ( 888 705-7274 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

## H19000219876 3 STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	provisions of sections 607.050 ange is submitted for a corpora er to change its registered offic	ition organized i	inder the la	ws of the State of	Elorida	
2. The principa	the corporation: Sea Star I office address: 10401 DEE ONVILLE, FL 3225	RWOOD PA	ARK BLV			
3. The mailing	address (if different):	<del></del>				
4. Date of incor	rporation/qualification: 11/6	/1997	Document	number: <u>P97</u> (	000095257	
	ed street address of the current rantment of State: (If resigned, er	nter resigned)	and registere	ed office on file v		
	1200 SOUTH PINE ISLAND ROAD				TOP.	متكت
	PLANTATION		FL	33324	2019 JUL 22 SECRETARY TAIL ALL	्य इस्टब्स् इस्टब्स्
6. The name an (if changed):	Registered Age	nt Solutio	<del>-</del> ,	). 	office SSEE FL	
		P.O. Box NOT accept	3230	)1	_	
The street addr	ress of its registered office and I be identical.	the street addre	ss of the bu	siness office of i	its registered agent,	
· -	as authorized by resolution du the board, or the corporation ha					
	el J. Noone ure of an officer or director	<u>M</u> i	ichael J	. Noone	President	
I hereby accep. I further agree performance of agent. Or, if the hereby confirm	t the appointment as registered to comply with the provisions f my duties, and I am familiar his document is being filed men that the corporation has been gnature. Registered Agent	d agent and agri of all statutes r with and accept rely to reflect a notified in writ	ee to act in elative to th the obligat change in th	this capacity. e proper and col ion of my positio e registered offi hange.	mplete on as registered	
If signing on be	chalf of an entity:					
	Hart, Assistant Secretar	у				

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