Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H030002089578)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0380

From:

Account Name : BRINKLEY, MCNERNEY & MORGAN

Account Number : 076077003213
Phone : (954)522-2200
Fax Number : (954)522-9123

RECEIVED
03 JUN-6 AH 10: 41
IVISION OF OORPORATION

REGISTERED AGENT CHANGE

STARMARK INTERNATIONAL, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

O3 JUN-6 PH 1:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Fling Manus

Comorate Filing

Rublic Access Halp

FAX AUDIT NO. H03000208957 8

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

		2, 617.0502, 607.1508, or 617.1508, . ration organized under the laws of the	
FLORIDA	in order to change its regi	istered office or registered agent, or i	both, in the State
of Florida.	the corporation: STARMARK INT	ERNATIONAL, INC.	
	•	HIGHWAY, FORT LAUDERDALE, FL	33316
3. The mailing	address (if different): SAME		
4. Date of incor	poration/qualification: 02/26/19	998 Document number: Ps	98000018940
	d street address of the current regi artment of State:	istered agent and registered office on f	ile with the
	CORPORATION COMPANY OF	IMAIM	40 %
	1500 MIAMI CENTER, 201 SOUT	TH BISCAYNE BOULEVARD	
	MIAMI, FL 33131		1000
6. The name a changed):	nd street address of the new regi	istered agent (if changed) and /or reg	gistered officer (II
	MICHAEL J. MCNERNEY, ESQ.		_
	200 EAST LAS OLAS BLVD., SUI		TE STATE OF THE ST
		al mailbox NOT seceptable)	
	FORT LAUDERDALE, FL 33301		
agent, as chang	ged will be identical.	e street address of the business office	•
Such change wanthorized by j	as authorized by resolution duly the board or the corporation has be	adopted by its board of directors or been notified in writing of the change	y an officer so
(Signature of an oillies	e. chadren or vice theirman of the board	Dan L. Estes, Particlent/Director (Finited or typed name and title)	
		gent and agree to act in this capacity all statutes relative to the proper and	I complete
performance of registered agei office address,	f my duties, and I am familiar wit nt. Of, if this document is being f I hereby confirm that the corport	gent and agree to act in this capacity all statutes relative to the proper and th and accept the obligation of my po- filed merely to reflect a change in the ation has been notified in writing of t	sition as regiștered his change.
milan	ma her	APRIL <u>#10</u> , 2003	
If signing on beha	Signature of Registered Agent)	(Date)	•
TT 91RumB on Della	an or an entity.		
	(Typed or Printed Name)	(Capacity)	

* * * FILING FEE: \$35,00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314