08000028605

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ON MAR 24 PM 4: 09

J. BRYAN

MAR 2 5 2008

EXAMINER

COVER LETTER

TO: Registration Solution of Con		/		
SUBJECT:	Staro4life (Name of Lin	LLC Name nited Liability Company)	Change	
The enclosed Articles of	`Amendment and fee(s) are sul	bmitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Frank	Lestoric (Name of Person)		
	Loanstar	Jewerly & Pewn (Firm/Company)		<u> </u>
	6080 Ser	(Address)		VISION OF
	Seminole	(City/State and Zip Code)		OB HAR 24 PH 4: 09
For further information of	concerning this matter, please of	call:		Tions
Frank (Name	estoric of Person)	at (727) 804-34 (Area Code & Daytime	124 Telephone Number)	
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Sta Certified Copy (additional copy	atus &

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
(Name of the Limited Liability Company as it now appears on our records.)
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on 03/19/2008 and assigned
Florida document number <u>LO800028605</u>
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here: Loanstar Sewelry & Pawn LLC
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: (Enter Florida street address)
(Estier Providu street dadress)
, Florida
(City) (Zip Code)
New Designatured Agent's Signature if shanging Designatured Agents

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Type of Action **Title** <u>Name</u> **Address** ☐ Add Remove Remove Add Remove Remove ∐Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 3-20-2008 Signature of a member of authorized representative of a member Frank Lestoric
Typed or printed name of signee

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00