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**EXAMINER** 

## **COVER LETTER**

SUBJECT: ALL-STA		MANAGEMENT, LLC ited Liability Company)	·· <del>·</del>		8
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.			
Please return all correspon	dence concerning this matter	to the following:			
	Richard Padron				
		(Name of Person)			
		(Firm/Company)		OS SEC	
	14707 South Dixie Highw	vay, Suite 316		DEC AH/	7
		(Address)		3 ARY SSEE	
	Palmetto Bay, Florida 33	176	•		
		(City/State and Zip Code)		2: 0: STATE STATE	<u> </u>
For further information co	ncerning this matter, please ca	all:	Ì	) 	
Richard Padron (Name of	F Posson)	at ( 305 ) 986-4411  (Area Code & Daytime To	elenhone Number)		
(rame of	reison	(Alea Code & Daytine 19	elephone (valider)		
Enclosed is a check for the	e following amount:				
☑ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	osed)

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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

ALL-STAR COMMUNITY MANAGE				
(Name of the Limited L (A F	iability Compar Iorida Limited L	ny as it now appears on our r lability Company)	ecords.)	
The Articles of Organization for this Limited Lial	oility Company	were filed on July 25, 2008		and assigned
Florida document number L08000072124	<u></u> •			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liab	ility company here:		
ALL-STAR GROUP, LLC				
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company," the de	signation "	LLC" or the abbreviation
Enter new principal offices address, if applicat	ole:	14707 South Dixie Highw	ay, Suite :	316 0
(Principal office address MUST BE A STREET	ADDRESS)	Palmetto Bay, Florida 331	176	F I
Enter new mailing address, if applicable:		14707 South Dixie Highw	ay, Suite	FF PH 2
(Mailing address MAY BE A POST OFFICE B	<u>0X)</u>	Palmetto Bay, Florida 331	176	5m 8
B. If amending the registered agent and/or registered agent and/or the new registered office  Name of New Registered Agent:  New Registered Office Address:	14707 South I	e: Dixie Highway, Suite 316 (Enter Floria	la street aa	ddress)
	Palmetto Bay	(City)	Florida _	33176 (Zip Code)
		(City)		(Lip Code)

## 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)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGKM - Maii	MGRM = Managing Member					
<u>Title</u>	Name	Address	Type of Action			
			Add Remove			
<del></del>			Add Remove			
			Add Remove			
			Add Remove			
	<del></del>		Add Remove			
D. If amending	g any other information, enter chang	e(s) here: (Attach additional sheets, if necessary)	Cái PH			
  Dated	December 23 , 2008	JATE DRIDA	<i>?:0</i> 2			
	The Take					
<u></u>	Richard Padron	or authorized representative of a member or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00