

L12000155226 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

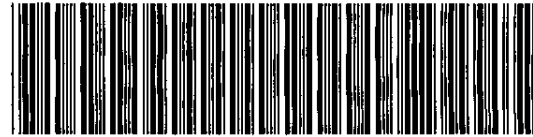
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JAN 23 2014
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CELINE STAR LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Wael Bottros
Name of Person

CELINE STAR LLC
Firm/Company

1180 S. AMERICA WAY
Address

MIAMI FL 33132
City/State and Zip Code

HANY@VBMTEL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wael Bottros at (305) 905-3415
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

RECEIVED
JUN 21 PM 5:25

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

CELINE STAR LLC

(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 12/13/2012 and assigned
Florida document number L12000155826

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CELINE STAR LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1180 S. AMERICA WAY
MIAMI FL
33132

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME AS ABOVE

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:

SAMG

New Registered Office Address:

1180 S AMERICA WAY

Enter Florida street address

MIAMI

City

Florida

33132

Zip 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
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PRE	Wael Botros Botros	1180 S. AMERICA WAY MIAMI FL 33132	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
VP	PHILLIP JOFFEY	1180 S. AMERICA WAY MIAMI FL 33132	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
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 2019 JUN 21 11:56 AM
 MIAMI

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FILLING FOR DBA
MIAMI SKY LIVE GRILL

Dated 12/14/13

Wael Botros

Signature of a member or authorized representative of a member

Wael Botros

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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