

H23000239170 3

Division of Corporations

7/7/23, 4:10 PM

L19000152854

Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850)617-6383

From:

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Account Number : I20200000130
Phone : (954)345-7888
Fax Number : (786)713-1940

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
INTERNATIONAL STAR LLC

Certificate of Status	0
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S. ROBERTS

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JUL 10 2023

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

INTERNATIONAL 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 06/14/2019 and assigned
Florida document number L19000157854

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)

580 EAST OSCEOLA PARKWAY

KISSIMMEE, FL 34744

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

580 EAST OSCEOLA PARKWAY

KISSIMMEE, FL 34744

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:

OPC AND SONS LLC

New Registered Office Address:

580 EAST OSCEOLA PARKWAY

Enter Florida street address

KISSIMMEE

City

Florida 34744

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 605, 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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MANZANOS, CESAR AUGUSTO	580 EAST OSCEOLA PARKWAY	<input type="checkbox"/> Add
		KISSIMMEE, FL 34744	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	2BM INTERNATIONAL SAS	580 EAST OSCEOLA PARKWAY	<input checked="" type="checkbox"/> Add
		KISSIMMEE, FL 34744	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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