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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

5/23/22

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2022 APR 23 AM 10:29  
ST. PAUL  
ALL MASS.

FILED

LLC  
Amend  
6/23/22  
DE



RECEIVED

2022 MAY 23 PM 4:12

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
TALLAHASSEE, FL

August 5, 2021

NICOLE HARRIS  
10226 CURRY FORD ROAD  
SUITE 107 PMB 1159  
ORLANDO, FL 32825

SUBJECT: STARJOURNEY INVESTMENTS LLC  
Ref. Number: L21000178076

We have received your document for STARJOURNEY INVESTMENTS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Summer Chatham  
OPS

Letter Number: 021A00018513

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: STARJOURNEY INVESTMENTS 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:

NICOLE HARRIS

Name of Person

Star Journey Investments

Firm/Company

10226 CURRY FORD ROAD SUITE 107 PMB1159

Address

ORLANDO 32825

City/State and Zip Code

STARR@STARSPLACES.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICOLE HARRIS

973

223-1369

at ( )

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

STARJOURNEY INVESTMENTS 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 4/16/2021 and assigned  
Florida document number L21000178076

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)

10226 CURRY FORD ROAD SUITE 107

ORLANDO, FL  
32825

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2040 SWEET BIRCH LANE

ORLANDO FL 32828

FILED  
2022 MAY 23  
AM 10:29  
CLERK OF COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE COUNTY OF ORANGE, FLORIDA

**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:

NICOLE HARRIS

New Registered Office Address:

10226 CURRY FORD ROAD SUITE 107

*Enter Florida street address*

ORLANDO

*City*

, Florida 32825

*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

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>
OWNER	NICOLE HARRIS	10226 CURRY FORD RD SUITE 107 ORLANDO FL	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Nicole Harris	2040 Sweet Birch lane Orlando FL 32828	<input checked="" type="checkbox"/> Add
		10226 Curry Ford Rd Orlando FL Ste 107	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<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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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

① Need me Nicole Harris added as  
authorized signer

② Replace physical address to 2040 Sweet  
Birch Lane FL 32822

③ I previously sent a check for charges  
and the check was cashed but charges  
were not made.

**E. Effective date, if other than the date of filing: 07/12/2021 (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 7/17, 2021

Nicole Harris

Signature of a member or authorized representative of a member

Nicole Harris

Typed or printed name of signee