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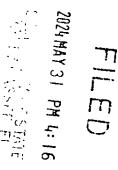
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO: Registration Se Division of Cor						
Stardom Es	states LLC					
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Andrew Pierce					
	Name of Person					
	Cindy's Florida LLC					
		Firm/Company				
	8051 N. Tamiami Trail S	STE E6				
		Address				
	Sarasota, Florida, 3424	3				
		City/State and Zip Code				
	Florida@cloudpeaklaw.c	om to be used for future annual repo				
For further information c	n-mail address: (concerning this matter, please c		notheadon)			
Andrew Pierce		727 300-00				
Name o	f Person	at () Area Code D	Daytime Telephone Number			
Enclosed is a check for the	he 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)			
<u>Mailing Addres</u> Registration S		<u>Street Addre</u> Registratio				
Division of C		Division of	f Corporations			
P.O. Box 632			of Tallahassec			
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810						

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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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 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>	Address	Type of Action
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			□Remove
			□Change
			□Add
			□Remove
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an effe	ective date is listed, the If the date inserted i	date must be specifi	c and cannot be pr	rior to date of fili	ng or more than 90 o	lays after filing.) Purs	uant to 605.0207 (not be listed as t
	ent's effective date of				iy ining requirem	oms, this date will i	tor oc fisica as i
recore	d specifies a delayed	effective date, bu	t not an effectiv	e time, at 12:0	l a.m. on the earli	er of: (b) The 90th	h day after the
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Typed or printed name of signee