Division of Corporations



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Division of Corporations

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Account Number : 120010000062

Phone : (323)962-8600 Fax Number : (323)962-3889

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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Registration Section

P.O. Box 6327

Tallahassee, FL 32314

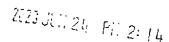
COVER LETTER

Div	ision of Corp	porations ·*			
chio in ove	S STAR BD	M L.L.C.			
Name of Limited Liability Company					
77	المسلمانية الم	Amendment and fee(s) are subr	nisted for filing		
Please return	all correspon	ndence concerning this matter t	to the following:		
		Cheyenne Moseley			
			Name of Person		
		Legalzoom.com, Inc.			
			Firm/Company		
		101 N Brand Blvd 11th Fl			
,	Address				
		Glendale, CA 91203			
			City/State and Zip Code		
		grantmcgaugh@comcast.ne			
		E-mail address: (to be used for future annual report notific	cation)	
For further i	information c	oncerning this matter, please or	all:		
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	Name o	f Person	Area Code Daytime	Telephone Number	
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\$25.00		☐ \$30.00 Fifing 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		STREET/COURIE Registration Section Division of Corpora Clifton Building	ı		

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION 2023 JULY 24 Pil 2: 14 TO



(Name of the Limited Limited Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L20000023941	were filed on 01/16/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5375 NW 159th St., Unit #5038	
Principal office address MUST BE A STREET ADDRESS)	Miami Lakes FL 33014	
Enter new mailing address, if applicable:	5375 NW 159th St., Unit #5038	
(Mailing address MAY BE A POST OFFICE BOX)	Miami Lakes FL 33014	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:	ffice address on our records, <u>er</u>	ater the name of th
New Registered Office Address:	Enter Florida street address	
New Registered Office Address:		
New Registered Office Address:	, Florid:	aZiv Code

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

_ Add

☐ Remove

_ 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		2000 11 24 PH 2: 14		
<u>Title</u>	Name	Address	Type of Action	
AMBR	5 STAR			
		20298 NW 38TH PL MIAMI GARDENS, FL 33055	Remove	
			Change	
AMBR	CORNHUSKER CAPITAL			
		20298 NW 38TH PL MIAMI GARDENS, FL 33055	Remove	
			Change	
MGR	Grant S McGaugh	 	O Add	
			Remove	
		20298 NW 38th PI. Miami Gardens, PL 33055	Change	
			☐ Remove	
			Change	

 Add
Remove
☐ Change

Page 3 of 3

Grant S McGaugh

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