I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and
that my name appears above, or on an attachment with all other like empowered.

AMBR

SIGNATURE: VALDES, ALFREDO

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: VSTAR FINANCIAL, LLC

DOCUMENT# L15000040073

Current Principal Place of Business:

8151 NW 74 AVENUE MIAMI, FL 33166

Current Mailing Address:

PO BOX 660685 MIAMI, FL 33266 US

FEI Number: 47-3338806

Name and Address of Current Registered Agent:

VALDES, ALFREDO 8151 NW 74 AVENUE MIAMI, FL 33166 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	: ALFREDO VALDES			08/01/2023	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	AMBR	Title	AMBR		
Name	VALDES, PIA	Name	VALDES, ALFREDO		
Address	PO BOX 660685	Address	PO BOX 660685		
City-State-Zip:	MIAMI FL 33266	City-State-Zip:	MIAMI FL 33266		

2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

Aug 01, 2023 Secretary of State 3254154856CC

Certificate of Status Desired: No

FILED

Date

08/01/2023