L05000108143

(Re	equestor's Name)		
(Ac	ldress)		
(Ac	ldress)		
(Cil	ty/State/Zip/Phone	: #)	
PICK-UP	☐ WAIT	MAIL	
(Ви	siness Entity Nam	ne)	
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

Office Use Only



500138714595

500138714595 12/16/08--01022--017 **55.00

08 DEC 16 AM 10: 44

SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

DEC 1 7 2008

EXAMINER

· COVER LETTER

TO: Registration Security Division of Corp			
SUBJECT: Starwork	s LLC		
	(Name of Lim	ited Liability Company)	
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Lisa Monk		
		(Name of Person)	
		(Firm/Company)	
	3751 E Fowler Ave		
		(Address)	
	Tampa, FL 33612		
		(City/State and Zip Code)	
For further information con	ncerning this matter, please c	all:	
Lisa Monk		at (<u>813</u> 857-2992	
(Name of	Person)	(Area Code & Daytime T	elephone 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Starworks LLC					
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our recon Liability Company)	rds.)			
The Articles of Organization for this Limited Liability Company	were filed on 11/07/1005	and assigned			
Florida document number L05000108143					
This amendment is submitted to amend the following:					
(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 11/07/1005 and assigned orida document number L05000108143 The Articles of Organization for this Limited Liability Company were filed on 11/07/1005 and assigned orida document number L05000108143 The Articles of Organization for this Limited Liability Company were filed on 11/07/1005 and assigned orida document number L05000108143 The Articles of Organization for this Limited Liability Company were filed on 11/07/1005 and assigned orida document number L05000108143 The Articles of Organization for this Limited Liability Company were filed on 11/07/1005 and assigned orida document number L05000108143 The Articles of Organization for this Limited Liability Company were filed on 11/07/1005 and assigned orida document number L05000108143 The Articles of Organization for this Limited Liability Company were filed on 11/07/1005 and assigned orida document number L05000108143 The Articles of Organization for this Limited Liability Company were filed on 11/07/1005 and assigned orida document number L05000108143 The Articles of Organization for the abbreviation fo					
The new name must be distinguishable and end with the words "Lim" "L.L.C."	ited Liability Company," the design				
Enter new principal offices address, if applicable:	3751 E Fowler Ave	SE DIVIG			
(Principal office address MUST BE A STREET ADDRESS)	Tampa, FL 33612				
Enter new mailing address, if applicable:	3751 E Fowler Ave	ST4 00.14			
(Mailing address MAY BE A POST OFFICE BOX)	Tampa, FL 33612	<u> </u>			
	·-··				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the nev			
Name of New Registered Agent:					
New Registered Office Address:					
	(Enter Florida street address)				
	, Flor				
	(City)	(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 608, 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)

MGR = Ma MGRM = !	anager Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM_	Danny Hudson		✓ Add ☐ Remove
			Add Remove
			☐ Add ☐ Remove
	,————		☐ Add ☐ Remove
			☐ Add ☐ Remove
			Add Remove
). If amen — — —	nding any other information, e	enter change(s) here: (Attach additional sheets, if necessary.)	SECRETARY OF STAIL DIVISION OF CORPORATIONS 08 DEC 16 AM 10: 44
Dated D	ecember 10, Signature	of a member or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00