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EXAMINER

- COVER LETTER

	tration Se on of Co	ection rporations				
SUBJECT:		ALLSTAR	COACHES, LLC			
		Name of Lim	ited Liability Company	*****		
The enclosed A	rticles of	`Amendment and fee(s) are su	bmitted for filing.			
Please return al	l correspo	ondence concerning this matte	r to the following:			
			Barbara Schreibman			
			Name of Person			
		Barb	Barbara H. Schreibman, Esq.			
Firm/Company				·		
		2645 Ev	acutive Park Drive - S	uite 102		
		2043 LX	2645 Executive Park Drive - Suite 102 Address			
			5. 00004		ž ,	
Weston, FL 33331 City/State and Zip Code			· · · · · · · · · · · · · · · · · · ·			
	barbara@schreibmanlaw.com			BEC 2	- 1	
		E-mail address: (to be used for future annual rep	ort notification)	27 SSI	1
For further info	rmation o	concerning this matter, please	call:			11
	Barba	ara Schreibman	at (_954)_	389-1452	FLORIDA FLORIDA	-
		of Person		Daytime Telephone Number	DA F	
Enclosed is a ch	neck for t	he following amount:				
\$25.00 Filin	ig Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is e	nclosed) Certified	ite of Status &	ed)
	Regist	ING ADDRESS: ration Section on of Corporations	Registration	COURIER ADDRESS: n Section Corporations		

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A	LLSTAR COACHES, LLC)		
(<u>Name of the Limite</u> (d Liability Company as it now appea A Florida Limited Liability Company)	rs on our records.		
The Articles of Organization for this Limited I	Liability Company were filed on	May 9, 2006	and assigned	
Florida document numberL0600005				
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited liability company he	<u>re</u> :		
The new name must be distinguishable and end w "L.L.C."	rith the words "Limited Liability Comp	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)		N	
		<u> </u>		
		7		
Enter new mailing address, if applicable:	<u></u>		3	
(Mailing address MAY BE A POST OFFICE	<u> BOX)</u>	ŗ	<u> </u>	
		<u> </u>	5	
B. If amending the registered agent and registered agent and/or the new registered of		our records, <u>enter t</u>	he name of the new	
registered agent and/or the new registered of	onice address here:			
Name of New Registered Agent:	Barbara H. Schreibman, Esq.			
New Registered Office Address:	2645 Executive Park Drive	- Suite 102		
	E	iter Florida street add	ress	
	Weston	, Florida	33331	
	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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

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<u>Title</u>	<u>Name</u>	Address	Type of Ac	<u>tion</u>
MGRM	Robert Lemon	51 NW 45th Avenu Suite 107 Deerfield Beach, F	Remove	
			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
D. If amend	ling any other information,	enter change(s) here: (Attach addition		
			EC27 PH	THE STATE OF THE S
Dated	December 24	, <u>2010</u> .	SIME STATE	RI WE
	Signature	of a member or authorized representative	of a member	
		Barbara H. Schreibman, Esq.		

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Filing Fee: \$25.00