

L08000049919

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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(((H15000127071 3)))



H150001270713ABCY

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : RC TAX SERVICE LLC
Account Number : I20140000083
Phone : (407) 932-0040
Fax Number : (407) 520-5473

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

15 MAY 28 AM 10: 29

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
G & Z DOLLAR STAR LLC**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00



May 28, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

G & Z DOLLAR STAR LLC
13920 LANDSTAR BLVD
ORLANDO, FL 32824

SUBJECT: G & Z DOLLAR STAR LLC
REF: L08000049919

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The complete application was not received.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H15000127071
Letter Number: 115A00011171

RECEIVED
15 MAY 28 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

**TO: Registration Section
Division of Corporations**

H15000127 0713

SUBJECT: G&Z DOLLAR STAR LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LUZMILA ZAMBRANO

Name of Person

G&Z DOLLAR STAR LLC

Firm/Company

13920 LANDSTAR BLVD

Address

ORLANDO, FL 32824

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LUZMILA ZAMBRANO

407

985-8201

Name of Person

at ()

Area Code

Daytime Telephone 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
Cotton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
2015 MAY 28 AM 8:48
HIS0001290713
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

G & Z DOLLAR STAR LLC

(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 05/19/2008 and assigned
Florida document number L08000049919

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: CECILIA GONZALES

New Registered Office Address: 3339 VIRGINIA STREET #103

Enter Florida street address

MIAMI

City

Florida 33133

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 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

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

4150001270713

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LUZMILA ZAMBRANO	2366 BREWERTON LN	<input type="checkbox"/> Add
		ORLANDO, FL 32824	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CECILIA GONZALES	3339 VIRGINIA STREET #103	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33133	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

HIS 0001270913

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earliest of:
(b) The 90th day after the record is filed.

Dated MAY 27 2015

Luiz Zambrano

Signature of a member or authorized representative of a member

LUZMILA ZAMBRANO

Typed or printed name of signer

FILED
2015 MAY 28 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA