L09000105840

(Re	equestor's Name)				
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SECRETARY OF STATE
AND AHASSEE, FLORIE

J. BRYAN

JUN - 7 2011

EXAMINER

COVER LETTER

P.O. Box 6327 Tallahassee, FL 32314

TO:	Registration Sect Division of Corpo				
SUBJI	ECT:	5 Star Lien and Permit Services, LLC Name of Limited Liability Company			
		mendment and fee(s) are sub	_		
Please	return all correspond	lence concerning this matter	to the following:		
			Cleveland Bain Jr.		
			Name of Person		
-		5 Star Lien and Permit Services,LLC			
			Firm/Company		
		1787 NW 166 Ave		Bo =	
			Address		LC AF
		Pembroke Pines, Florida 33028		JUN-6 PH 3: 38	
			City/State and Zip Code		HA R
		Clev	velandbain@gmail.com to be used for future annual report notificati	<u>on)</u>	FST 43
For fur	ther information con	cerning this matter, please of		 ,	ATE S
	Clevel	and Bain Jr.	at (305) 79	8-8187	
	Name of P	erson	Area Code & Daytime Te	lephone Number	
Enclos	ed is a check for the	following amount:			
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &
	Registrati	G ADDRESS: ion Section of Corporations	STREET/COURIER Registration Section Division of Corporatio		

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5 Star Lien and Pe	ermit Services, LLC any as it now appears on our records.) Liability Company)	٠,	
(Name of the Limited Liability Comp. (A Florida Limited	ermit Services, LLC any as it now appears on our records.) Liability Company) 11/2/2000	7	
	Liability Company)	-	
The Articles of Organization for this Limited Liability Company	v were filed on 11/2/2009 and assigned		
Florida document numberL09000105840	OR DE		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
Goldstar Home I	nspections LLC		
The new name must be distinguishable and end with the words "Lim" L.L.C."	nited Liability Company," the designation "LLC" or the abbreviation	n	
Enter new principal offices address, if applicable:	1787 NW 166 Ave.		
(Principal office address MUST BE A STREET ADDRESS)	Pembroke Pines, Florida 33028		
Enter new mailing address, if applicable:	3837 Turtle Run Blvd.		
(Mailing address MAY BE A POST OFFICE BOX)	Apt.2518		
	Coral Springs, Florida 33067		
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address he		<u>w</u>	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Type of Action Title Address Name ☐ Add Remove ☐ Add Remove ☐ Add Remove ☐ Add Remove ∏Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) May 12 2011 Dated ____ Signature of a member or authorized representative of a member Cleveland Bain Jr. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00