(Re	equestor's Name)			
(Ac	ldress)			
(Ac	ldress)			
(Ci	ty/State/Zip/Phone	e #)		
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· (Bu	usiness Entity Nan	ne) .		
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K.SALY EXAMINER 15 2012

COVER LETTER

TO:	Registration S Division of Co			
SHRIE	CT.	Δ	ATS Star	
SUBJE	<u>.</u>			
The en	closed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please	return all corresp	ondence concerning this matter	to the following:	
	Lori Monaco			
ATS Star LLC				
			riini/Company	
1160 NE 87th Street				
			Address	
Miami FL 33138				
		E-mail address: (I.monaco@gmail.com to be used for future annual report n	otification)
For fur	Division of Corporations SUBJECT:			
	L	ori Monaco	at (_305)	
	Name	of Person	Area Code & Day	time Telephone Number
Enclose	ed is a check for t	the following amount:		
□ \$25	.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	Regist Divisi P.O. E	ration Section on of Corporations Box 6327	Registration Se Division of Col Clifton Buildin 2661 Executive	ction porations g : Center Circle

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

12 JUN 14 PM 4: 42

	ATS Star LLC	St.U), TALL)	MIASSEE, MORIDA
(Name of the Limit	ed Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	- MORIDA
The Articles of Organization for this Limited	Liability Company were filed on	02/12/2010	and assigned
Florida document number L100000	16617		
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability company her	<u>·e</u> :	
The new name must be distinguishable and end w "L.L.C."	vith the words "Limited Liability Compa	any," the designation "	LLC" or the abbreviation
Enter new principal offices address, if appl	icable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		<u> </u>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u> </u>		
B. If amending the registered agent and registered agent and/or the new registered of		our records, enter	the name of the nev
The second secon	one address nerv.		
Name of New Registered Agent:	Lori Monaco		
New Registered Office Address:	1160 NE 87th Street		
	En	lress	
	Miami	, Florida	33138
	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 Title **Type of Action** Name <u>Address</u> Add Remove ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add Remove ∐Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Amending the business activities conducted to include the consulting, purchase and sale of cars, motorcycles, boats, and real estate. June 11, 2012 Miami, FL Dated Signature of a member or authorized representative of a member Lori MOnaco Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00