

L110000008348

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MERIDIAN STAR MERCHANT SERVICES, 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:

Brandon Weitz

Name of Person

MERIDIAN STAR MERCHANT SERVICES, LLC

Firm/Company

1640 W Oakland Park Blvd #301

Address

Fort Lauderdale, FL 33311

City/State and Zip Code

Brandon@MStarPOS.com

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

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Brandon Weitz

Name of Person

at **305 967-7393**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$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**

MERIDIAN STAR MERCHANT SERVICES, 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 1/20/11 and assigned Florida document number L11000008348.

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 end with 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: Brandon Weitz

New Registered Office Address: 1640 W Oakland Park Blvd #301

Enter Florida street address

Fort Lauderdale, Florida 33311

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 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.

Brandon Weitz
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|-------------------|---|--|--|
| <u>MGRM</u> | <u>Jane A. Hallick</u> | <u>301 NE Town Terrace</u> <u>Jensen Beach FL 34957</u> | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| <u>MGR</u> | <u>Alan Cohen</u> | <u>301 NE Town Terrace</u> <u>Jensen Beach FL 34957</u> | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| <u>MGR</u> | <u>Thomas Wells</u> | <u>60 SW Hideaway Place</u> <u>Stuart FL 34994</u> | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| <u>MGR</u> | <u>Dennis Bonin</u> | <u>301 NE Town Terrace</u> <u>Jensen Beach FL 34957</u> | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| <u> </u> | <u> </u> | <u> </u> | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| <u> </u> | <u> </u> | <u> </u> | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

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JANUARY 27 2016

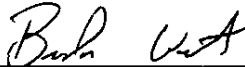
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated AUGUST 25, 2014



Signature of a member or authorized representative of a member

BRANDON WEITZ

Typed or printed name of signee

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Filing Fee: \$25.00

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