# 111000044273

(Re	questor's Name)		
(Ad	dress)		
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(Cit	ry/State/Zip/Phone	e #)	
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12 FEB 17 M 2: 52
18 FEB 17 M 2: 52
18 FEB 17 M 2: 52
18 FEB 17 M 2: 52

D. BRUCE
FEB 2.0 2012
EXAMINER



### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 18, 2012

GARY YU 8201 SW 162 STREET MIAMI, FL 33157

SUBJECT: GK STAR LLC Ref. Number: L11000044273

We have received your document for GK STAR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return 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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 912A00001200

## COVER LETTER

M.

TO: • Registration of	on Section Corporations		· E	
SUBJECT:	GK	STAR LLC		
	Name of Lim	ited Liability Company		
The enclosed Article	es of Amendment and fee(s) are su	bmitted for filing.		
Please return all cor	respondence concerning this matte	r to the following:		
		GARY YU		
		Name of Person		
		GK STAR LLC		
		Firm/Company		
	8201 SW	162 STREET MIAMI FL 33	157	
		Address		
		City/State and Zip Code		
	E-mail address:	to be used for future annual report notifi	cation)	
For further informati	on concerning this matter, please	call:	LAHA	-1
	HELEN QI	au \	210-7419	
Na	me of Person	Area Code & Daytim		
Enclosed is a check	for the following amount:		2: §2 STATE EORIDA	ر
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Certificate of Status & Certified Copy (additional copy is enclosed)	
Re Di P.G	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	STREET/COURE Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32:	ntions nter Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•	GK STA		ŧ. * •	
(Name of the Limited (A	Liability Compa Florida Limited	ny as it now appear Liability Company)	s on our records.)	,
The Articles of Organization for this Limited Lie	ability Company	were filed on	4/13/11	and assigned
Florida document numberL11000044	<u>273                                    </u>			
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	oility company her	<u>e</u> :	
The new name must be distinguishable and end with	the words "Lim	ited Liability Compa	ny," the designation "	LLC" or the abbreviation
"L.L.C."	<del></del>	,	· .	
Enter new principal offices address, if applica	ıble:			
(Principal office address MUST BE A STREET ADDRESS)		17201 Collins	ave, Unit 506	
		Sunny Isles, I	FL 33160	<u>)</u>
				2 F
Enter new mailing address, if applicable:		17201 Collins	Ave, Unit 506	A B TI
Mailing address MAY BE A POST OFFICE BOX)		Sunny Isles, I	FL 33160	SSE 17
				mg z m
				10 N 13
B. If amending the registered agent and/o registered agent and/or the new registered off			ur records, <u>enter</u>	the name of the new
The second agent and/or the new registered on	ice audi ess nei	<u>c</u> .	•	<del>-</del>
Name of New Registered Agent:	Jorge Arbel	aez		
New Registered Office Address:	17201 Colli	ns Ave Unit 506	•	
		Ent	er Florida street ada	lress
i	s	unny Isles	, Florida	33160
	-	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

Page 1 of 2

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 ≠ Mana MGRM = Ma	nger maging Member				
<u>Title</u>	Name	Address	Type of Action		
MGR	YU, GARY D	8201 Sw 162" 5T Miami FL 33157	Add Remove		
<u>HGR</u> M	W, HONG	P201 SW 1624 ST Miami FL 33187	Add Remove		
		2 17201 Collins Am No Sunny Isles, FL 33/60	Add Remove		
HGR	Torge E. ARBEUEZ	17201 Collins Av. #506	Add Laremove		
Registered . VNAME	TORGE E. ARBELLEZ Jant Adres Juyu, GARY Q	82015a) 16251 Higher El 33/60	Add Remove		
	Agent Name VORGE E. ARBELARZ				
·		SUNNY TSLES FL33/60 s) here: (Attach additional sheets, if necessary.)	Remove		
		AHASSEE SSEE	F.  -		
Dated	Georgy Mr Jay	FLORIDA	聖の問		
-		r authorized representative of a member			
•••	Typed or	printed name of signee	<del></del>		
Page 2 of 2					

Filing Fee: \$25.00