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(Re	equestor's Name)	
(A	ddress)	· .
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(C	ity/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Na	me)
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COVER LETTER

' Registration Section

Division of Co	rporations	,		
SUDJECT.	Philant	hroFest, LLC		*
SUBJECT:	Name of Limit	ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
		Estrellita S. Sibila		
		Name of Person		
	-	Firm/Company		
		2246 SW 1 Street		
•		Address		
		Viami, Florida 33135 City/State and Zip Code		
	estre	ellita@philanthrofest.co	om	
	E-mail address: (to be used for future annual repo	ori notification)	
For further information	concerning this matter, please of	call:		
	strellita Sibila	at (_305_)	281-2200	
Name	of Person	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 er	\$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is e	
Regis Divis P.O. 1	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	Registration Division of Clifton Buil	Corporations ding tive Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Philanthro	fest, LLC		
Liability Compa Florida Limited I	ny as it now appear Liability Company)	s on our records.)	
ability Company	were filed on	January 30, 2012	and assigned
owing:	,		S ON IS AN
the limited liab	ility company her	<u>e</u> : ·	A PARTY OF THE PAR
h the words "Limi	ited Liability Compa	ny," the designation "L	LC" or the abbreviation
able:	2246 SW 1 S	treet	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		a 33135	
			<u> </u>
	2246 SW 1 S	treet -	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		a 33135	
		our records, <u>enter tl</u>	ne name of the new
Estrellita Si	bila	,	
2246 SW 1	Street		
	En	ter Florida street addi	ress
	Miami	, Florida	33135
	City		Zip Code
	Liability Compa Florida Limited I ability Company 503 wing: the limited liab the words "Lim able: TADDRESS) or registered of fice address her Estrellita Si	ability Company were filed on	Liability Company as it now appears on our records.) Florida Limited Liability Company) ability Company were filed on

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 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

<u>litle</u>	<u>Name</u>	Address	Type of Action
MGRM	Stellar Strategy, LLC	2246 SW 1 Street Miami, Florida 33135	Add Remove
/GRM	Estrellita Sibila	3064 Blaine Street Miami, Florida 33135	Add Remove
<u>_</u>			Add Remove
			Add Remove
		. ,	AddRemove
 			AddRemove
. If amen	ding any other information, enter cl	hange(s) here: (Attach additional sheets, if nec	cessary.)
	October 10	<i>2</i> 012	
Dated			<u> </u>
	Estrellita T	ember or authorized representative of a member C. Sizi U. G. Managing Member Typed or printed name of signed	r of Stellar Strateg

Page 2 of 2

Filing Fee: \$25.00