## U2003345

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## **COVER LETTER**

	Division of Corp			
SUBJEC	Gamstar LL	.c		
SUBJEC	. 1;	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	tum all correspo	ndence concerning this matter	to the following:	7
		JANETH VIVIANA, PRIC	CE	
			Name of Person	
			Firm/Company	
		10275 COLLINS AVE AF	PT 1201	
			Address	
		BAL HARBOUR, FL 331	54	
		pavenali@gmail.com	City/State and Zip Code	
			to be used for future annual report not	ification)
For further	er information c	oncerning this matter, please c	all:	
JANETH	i viviana pr	ICE	786 3998967 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	ne following amount:		
\$25,0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ING ADDRESS:	STREET/COUR Registration Secti	
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	enter Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gamstar LLC		
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Florida document number	Company were filed on October 06, 2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the lin</u>	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	7 TAN
		7 50
Enter new mailing address, if applicable:		# 5: 04
(Mailing address MAY BE A POST OFFICE BOX)		P
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	i.a.
<del></del>	City , Flor	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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Hugo Ignacio Avenali	10275 Collins Av, Apt 1201	□ Add
		Bal Harbour, FL 33154	Remove
			☐ Change
AMBR	Maria Belen Avenali	10275 Collins Av, Apt 1201	
		Bal Harbour, FL 33154	□ Add  Remove  □ Charge □ Charge □ Add □ Remove □ Remove □ Charge □ Charge
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			□ Remove
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Effective date, if other than the date (If an effective date is listed, the date must be something). If the date inserted in this block document's effective date on the Department.	specific and cannot be prior to does not meet the applica	o date of filing or more than ble statutory filing requi	(optional) n 90 days after filing.) Pursuant to rements, this date will not be	605.0207 (3)(b) listed as the
the record specifies a delayed eff The 90th day after the record		an effective time,	at 12:01 a.m. on the ea	arlier of:
Dated March 17	, 2016	<u> </u>		

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