L140000 87156

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J. HARRIS

COVER LETTER *

TO:

Registration Section
Division of Corporations

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

SUBJECT:	A-STA	R MOBILE, LLC		
	Name of Lim	ted Liability Company		
	mendment and fee(s) are sub-	-		
Please return an correspon	dence concerning this matter	to the following:		
	1	FRANCISCO J. ALVAREZ		
		Name of Person		
		A-STAR MOBILE, LLC		Status &
		Firm/Company		
	458	WESTON ROAD, STE 117		
		Address		
	WI	ESTON, FLORIDA 33331		
	ops	City/State and Zip Code mgmt@a-starmobile.com		
	•	to be used for future annual report	notification)	
For further information co	ncerning this matter, please ca	all:		
FRANCISC	CO J. ALVAREZ	954 at (816-4265	
Name of	Person		ytime Telephone Number	
Enclosed is a check for the	e following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclo	
	NG ADDRESS: tion Section	STREET/CO Registration S	URIER ADDRESS: ection	

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A-STAR MOBILE, LLC

(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Company Florida document numberL14000087156	were filed on	05/30/2014	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the design	nation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	11401 PINES BOU	LEVARD	
(Principal office address MUST BE A STREET ADDRESS)	STE 5546		
	PEMBROKE PINE	ES, FLORIDA 33026	12 P
Enter new mailing address, if applicable:	4581 WESTON RC)AD	SSECTION AND AND AND AND AND AND AND AND AND AN
(Mailing address MAY BE A POST OFFICE BOX)	STE 117		927
	WESTON, FLORII	DA 33331	Om O
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:	<u>e</u> ;	ur records, <u>enter</u>	the name of the new
New Registered Office Address:	4581 WESTON ROAD, STE 117		
	Enter Florida street address		
	WESTON	, Florida <u>33</u>	331
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>.</u>		
I hereby accept the appointment as registered agent and agrovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my provided for in Cha	duties, and I am f pter 605, F.S. Or,	familiar with and if this document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	MONAHAN, WILLIAM J.	401 EAST LAS OLAS BLVD.	□ Add
		STE 130-627	■ Remove
		FORT LAUDERDALE, FL 33301	Change
-CEO/Pres	ALVAREZ, FRANCISCO J.	4581 WESTON ROAD	Add
Eo <i>j Pres</i> ident	ALVAREZ, FRANCISCO J.	STE 117	Remove
		WESTON, FLORIDA 33331	■ Change
-Senior Vi	CLAGG, THOMAS B.	4581 WESTON ROAD	
Senior Vice 1	93	Teasurer STE 117	Remove
		WESTON, FLORIDA 33331	■ Change
			Remove
			□ Change
			FILE D
		Sign Change	
			Add Remove
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	e, if other than the date o te is listed, the date must be spec ate inserted in this block doe	of filing: cific and cannot be prior to date of filing or me es not meet the applicable statutory filing ent of State's records.	(optional) ore than 90 days after filing.) Pursuant to 6 g requirements, this date will not be li	605.0207 isted as
Note: If the delocument's effort	fective date on the Departme	ctive date, but not an effective t filed.	ime, at 12:01 a.m. on the ear	lier of
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