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2024 DEC 13 PM 4:21  
CLERK OF COURT  
JANUARY 13 2025

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BRIGHT STAR INSURANCE 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:

David R Guenette Jr.

\_\_\_\_\_  
Name of Person

BRIGHT STAR INSURANCE SERVICES, LLC

\_\_\_\_\_  
Firm/Company

4300 S. Jog Road # 542052

\_\_\_\_\_  
Address

Green Acres, FL 33454

\_\_\_\_\_  
City/State and Zip Code

brightstar.insuranceservices@gmail.com

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

For further information concerning this matter, please call:

David R Guenette Jr.

561 926-1655  
at (\_\_\_\_\_) \_\_\_\_\_  
Area Code Daytime Telephone Number

\_\_\_\_\_  
Name of Person

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|---|--|--|

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

BRIGHT STAR INSURANCE SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
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The Articles of Organization for this Limited Liability Company were filed on October 31st 2015 and assigned  
Florida document number L1400170085.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

POLARIS FINANCIAL SOLUTIONS, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

DAVID R GUENETTE JR.

(Principal office address MUST BE A STREET ADDRESS)

4300 S. Jog Rd., #542052

Green Acres, FL 33454

Enter new mailing address, if applicable:

4300 S. Jog Road

(Mailing address MAY BE A POST OFFICE BOX)

# 542052

Green Acres, FL 33454

**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:

David R Guenette Jr.

New Registered Office Address:

4300 S. Jog Road #542052

*Enter Florida street address*

Green Acres

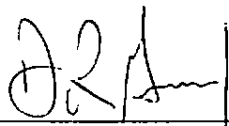
Florida 33454

*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.*



**If Changing Registered Agent, Signature of New Registered Agent**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated December 9th

Signature of a member or authorized representative

David R Guenette Jr.

**Filing Fee: \$25.00**