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COVER LETTER

| CAT STAR CAFE, 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: KARINA GOLDENBERG | TO: | | stration Sect sion of Corp | | | | | |
|--|-------------------|------------|-------------------------------|------------------------|-------------------------|---------------------------|--------------------------|--|
| 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: KARINA GOLDENBERG | SHEL | | CAT STAR | CAFE, LLC | | | | |
| RARINA GOLDENBERG | 3013 | | - | | | | | |
| Name of Person CAT STARS CAFE, LLC Firm/Company 9329 Sheridan St. #504 Address Hollywood, FL 33024 City/State and Zip Code kfgoldenberg@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KARINA GOLDENBERG Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Enclosed is a check for the following amount: \$25.00 Filing Fee \$25.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy Certificate of Status & Certified Copy Certified Copy Certified Copy Certified Copy | | | | | - | | | |
| CAT STARS CAFE, LLC Firm/Company 9329 Sheridan St. #504 Address Hollywood, FL 33024 City/State and Zip Code kfgoldenberg@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KARINA GOLDENBERG Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Enclosed is a check for the following Fee & Certificate of Status & Certificate of Status & Certificate Opy (additional copy is enclosed) | | | | KARINA GOLDENBERG | } | | | |
| Firm/Company 9329 Sheridan St. #504 Address Hollywood, FL 33024 City/State and Zip Code kfgoldenberg@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KARINA GOLDENBERG Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc | | | | | Name of Person | | | |
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| City/State and Zip Code kfgoldenberg@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KARINA GOLDENBERG Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\begin{align*} \text{S25.00 Filing Fee} & \$\$30.00 Filing Fee & \text{Certified Copy} & \text{Certificate of Status & Certified Copy} & \text{Certified Copy} & Certified | | | | | Address | | | |
| E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KARINA GOLDENBERG | | | | Hollywood, FL 33024 | | | | |
| E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KARINA GOLDENBERG at (| | | | | City/State and Zip Code | ··· | | |
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| Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\begin{align*} \text{Enclosed is a check for the following amount:} \\ \text{\text{\$\substack}} \begin{align*} \text{\$\substack} \ | KARINA GOLDENBERG | | | ; | | 8-8346 | | |
| \$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigcup \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$ Certified Copy | ••• | | Name of P | erson | | Daytime Telephone Num | ber | |
| Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy | Enclos | sed is a o | check for the | following amount: | , | , | | |
| (additional copy is enclosed) | ≘ \$2 | 5.00 Fil | ing Fee | | Certified Copy | Certifi losed) Certifi | cate of Status & ed Copy | |

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION OF

| CAT STAR CAFE, LLC | (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) rganization for this Limited Liability Company were filed on 06/07/2016 and assigned number L16000109827 s submitted to amend the following: name, enter the new name of the limited liability company here: E, LLC be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." pal offices address, if applicable: 9329 Sheridan St. #504 Hollywood, FL 33024 dig address, if applicable: 9329 Sheridan St. #504 Hollywood, FL 33024 the registered agent and/or registered office address on our records, enter the name of the new and/or the new registered office address here: New Registered Agent: | | | | |
|--|---|--|--------------------------|--|--|
| (Name of the Limited | d Liability Compa A Florida Limited | ny as it now appears Liability Company) | on our records.) | The state of the s | |
| The Articles of Organization for this Limited Lia Florida document number L16000109827 | bility Company | were filed on 06/0 | 07/2016 | and assigned | |
| This amendment is submitted to amend the follow | wing: | | | | |
| A. If amending name, enter the new name of | the limited liab | ility company her | <u>'e</u> : | | |
| CAT STARS CAFE, LLC | | • | | | |
| The new name must be distinguishable and contain the wo | rds "Limited Liabi | lity Company," the des | signation "LLC" or the | abbreviation "L.L.C." | |
| Enter new principal offices address, if applical | ble: | 9329 Sheridan St | . #504 | | |
| Principal office address MUST BE A STREET ADDR | | Hollywood, FL 33024 | | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B | | | | | |
| B. If amending the registered agent and/oregistered agent and/or the new registered offi | • | | our records, <u>ente</u> | r the name of the nev | |
| Name of New Registered Agent: | | , | | | |
| New Registered Office Address: | 9329 Sheridan St. #504 | | | | |
| | | Enter Floria | la street address | | |
| | Hollywood | | , Florida _ | 33024 | |
| | | 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 = N AMBR = A | lanager Authorized Member | | |
|---|------------------------------|-------------|-----------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| If an effective date is listed, the Note: If the date inserted | than the date of filing: ne date must be specific and call in this block does not med on the Department of State | annot be prior to date o et the applicable stat | f filing or more than 90 day | (optional) s after filing.) Pursuant to 605.02 ts, this date will not be listed | 207 as |
| ne record specifies a The 90th day after | delayed effective dat the record is filed. | te, but not an ef | fective time, at 12: | :01 a.m. on the earlier | of |
| Dated February 27 | ······································ | 2017 | | | |
| | Signature of a mer | lu 5000 | resentative of a member | | |
| | Signature pr a met | inder of authorized re | лежениние от 8 member | | |
| | T | yped or printed name of | of signee | | |

Page 3 of 3

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