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	(Requestor's Name)	
- <del></del>	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UI	P WAIT	MAIL
- 1., 11	(Business Entity Name)	
	(Document Number)	
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Certified Copies	Certificates of	Status
Special Instructions	s to Filing Officer:	





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## **COVER LETTER**

	Registration Se Division of Cor		-t	
SUBJEC	GOLDSTA	R RENTALS LLC		
		Name of Lin	ited Liability Company	·
The enclo	osed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		BERNARDO EGUSQUIZ	ZA	
		GOLDSTAR RENTALS	Name of Person	
		8113 SW 157th COURT	Firm/Company	
		MIAMI FLORIDA 33193	Address	
		BAE2053@HOTMAIL.CO	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notifi	cation)
For further	r information co	oncerning this matter, please ca	all:	
BERNAE	RDO EGUSQUI		786 419-2721 at ()	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed	is a check for th	e following amount:		
□ \$25.0	0 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)

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 AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020 JUN -2 FN 5: 04

GOLDSTAR RENTALS LLC		
( <u>Name of the Limited Liab</u> (A Flor	oility Company as it now appears on oida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Florida document number L16000167792	Company were filed on 09/08/2	016 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
GOLDSTAR SECURITY LLC		
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation	ation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	-	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	gistered office address on our ddress here:	records, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
<del></del>	Enter Florida st	reet address
		, Florida
	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

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>	2020	Type of Action
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Effect (If an eff Note: docum	ive date, if other than the date of filing:  cetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3Xb ent's effective date on the Department of State's records.
he rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
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The Dated	formy fright

Page 3 of 3

Filing Fee: \$25.00