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K. SALY JUN 15 2017

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Five Stars Rea Name of L	Aly Group LLC	
The enclosed Articles of Amendment and fee(s) are s	submitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
(Ovaig Packer Name of Person	
	Wallace & Packer, PC	
!	Address	vd. # 265
	Sunrise FL 33323 City/State and Zip Code	•
E-mail address	Dacker Of floridaelde s: (to be used for future annual report notific	r (aw cc.n
For further information concerning this matter, please	e call:	
Varie Packer Name of Person	at (<u>954</u>) <u>236 · 6</u> Area Code Daytime	2442 Telephone Number
Enclosed is a check for the following amount:		
☑ \$25.00 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)

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

FILED
2017 JUN 14 PM 3:07
ALLAHASSTE, FLORIS

FIVE STARS & This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address _. Florida __ Cirv

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 man	age, enter the title, name, and address of each	person being added			
or removed from our records: MGR = Manager		FILED				
AMBR = A	uthorized Member	ZUIT JUNIU S				
<u>Title</u>	<u>Name</u>	Address Add	: Q\$pe of Action			
MGR	Maria Eugenia Rudriguez- Hum. Ibn PA.	18457 NW 13 31.	<u>lD;</u> □ Add			
	Hum. Irn, PA.	Pembicke Pines £ 33029				
			Change			
MGR	Siomara Cullahan Pr	1041 NW 1915, Ave.	Add			
		Perbruice lines to 33029	Remove			
		<u></u>	□ Change			
MGR	Nuldry Josefina Weichselbaumer PA	12431 SW 45 Dr.	□ Add			
		Miramar, & 3:3:27	PRemove			
			Change			
MGR	Sandra P. Estrada PA	880 Garnet Circle	_□ Add			
		Wiskin R 33326	D_Remove			
			Change			
MGR	Claudia Toro icc	415 Lakeview Dr. #104	□ Add			
		Weston F. 33326	_UKemove			
			Change			
MGR	Sundra P Estrada	880 Garnet Circle	_II-Kild			
		12cs for Fi 33326	_□ Remove			
			_□ Change			

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coffective date is listed, the dat	e must be specific and	l cannot be prio	r to date of filin	g or more than:	90 days after tilir	ig.) Pursuant	to 605,02
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	Signature of a r	member or auth	norized represer	italive of a mer	iber		

Page 3 of 3

Filing Fee: \$25.00