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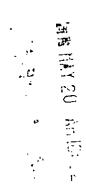
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Cold Star Aquatics //C Name of Limited Liability Company	5). ·
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	12
Ezequiel De Leon	مه آي (
Gold Star Aquetics UC	٠
550 NW 116 St Address	
City/State and Zip Code (50/dstar aquatics Gamas) (cm E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Ezequiel Delcon at (7816) 259-2789 Name of l'erson at (7816) Daytime Telephone Number	
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified (of Status &

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**

ARTICLES OF A	and the second s
TC ARTICLES OF O	• , , , , , , , , , , , , , , , , , , ,
OF	
Gold Star Aqua Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v	vere filed on O8 11 2017 and assigned
Florida document number <u>L 17 00 0 17 16 39</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
Gold Star Aquatix LL	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1021 Ives Dairy Road
(Principal office address MUST BE A STREET ADDRESS)	Building 3, suite 115
	Miami, F1, 33179
`	
Enter new mailing address, if applicable:	1021 Ires Dairy Road
(Mailing address MAY BE A POST OFFICE BOX)	1021 Ires Dairy Road Building 3 Smite 115
	Mam, FL 33179
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
<u></u>	, 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>	Address	Type of Action
			Remove
			Change
			□ Remove
			□ Change
			Add
			Remove
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-		Sign	ature of a	member or	authorized i	epresentative	of a member			

Page 3 of 3

Filing Fee: \$25.00