

6/3/2019

Division of Corporations

H190001756023

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190001756023)))



H190001756023AEC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : BEST PRO SERVICES INC
Account Number : 128140000068
Phone : (727)504-1870
Fax Number : (727)683-9500

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: HHELP123@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CROWN STAR LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

T GLASS

JUN 04 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CROWN STAR 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:

JETTMAR, DEREK

Name of Person

CROWN STAR LLC

Firm/Company

1408 N BETTY LANE

Address

CLEARWATER

City/State and Zip Code

4help123@gmail.com

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

For further information concerning this matter, please call:

JETTMAR, DEREK

at (727) 678-0446

Name of Person

Area Code

Daytime 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

2019 JUN -3 AM 10:12
FILED

APPROVED
AND
FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CROWN STAR LLC

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

The Articles of Organization for this Limited Liability Company were filed on 05/01/2019 and assigned
Florida document number L19000115728

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**)

1408 N BETTY LANE

CLEARWATER, FL 33755

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

1408 N BETTY LANE

CLEARWATER, FL 33755

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

City, Florida 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>	<u>Type of Action</u>
AMBR	JETTMAR, DEREK	2755 VIA CAPRI	<input checked="" type="checkbox"/> Add
		UNIT #1238	<input type="checkbox"/> Remove
		CLEARWATER, FL 33764	<input type="checkbox"/> Change
MGR	LYALIN, DMITRY	628 CLEVELAND STREET APT 1010	<input type="checkbox"/> Add
		CLEARWATER, FL 33755	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2019 JUN -3 AM 16:12
FILED

APPROVED
AND
FILED

page 1

11-11-61

APPROVED
AND
FILED

2019 JUN -3 AM 10:12

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 JUNE 03

2019

~~Signature of a member or authorized representative of a member~~

JET IMAR, DEREK

Typed or printed name of signer