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L19000178967

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COVER LETTER

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TO: Registration Section Division of Corporations

Star Manufacturing Processor, LLC

SUBJECT:

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:

Robert G. Menzies

Name of Person

FisherBroyles, LLP

Firm/Company

2390 Tamiami Trail North, Suite 100

Address

Naples, Florida 34103

City/State and Zip Code

robert.menzies@fisherbroyles.com

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

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

S25.00 Filing Fee

S30.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Star Manufacturing Processor, LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) 5: 5: 5: 5: 5: 5: 5: 5: 5: 5: 5: 5: 5:
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000178967</u> . This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	
Star Manufacturing Extraction, LLC	nay company nere.
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	540 B Road
	LaBelle, Florida 33935
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BOX)</u>	540 B Road LaBelle, Florida 33935
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: <u>Name of New Registered Agent</u> : <u>New Registered Office Address</u> :	address on our records, <u>enter the name of the new registered</u> Enter Florida street 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Robert G. Menzies	5013 Maxwell Circle, Apt. 101	■Add
		Naples, FL 34105	🗆 Remove
			□Change
MGR	Paul Courtaway	6554 FM 984	
		Ennis, TX 75119	🗆 Remove
			Change
			□Add
			Change
	<u></u>		🗆 Add
			Remove
			🗆 Change
			🗆 Add
			🗆 Remove
			🗆 Add
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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tive date if other than the date of filing:	(optional)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

September 8	2020	
Dated		
	lis Mie	
	Signature of a member or authorized representative of a member	
	\mathcal{O}	
Robert G. Menzies		
	Typed or printed name of signee	

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