

h20 0000006961

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

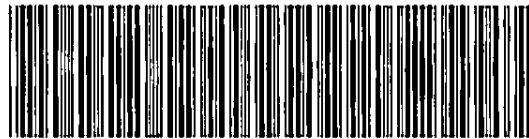
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500341977285

03/18/20--01002--001 \$435.00

FILED
CLERK OF STATE
JULIE C. COLLINGS
20 MAR 19 PM 11:26

Amend

MAR 30 2020

D CUSHING

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FIVESTAR COMPANY 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:

Jose Gabriel Omana

Name of Person

Firm/Company

7476 WOODBORN CT

Address

WINTER PARK, FL 32792

City/State and Zip Code

juancho0105@hotmail.com

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

For further information concerning this matter, please call:

Jose Villafana

407 7058014

Name of Person

at ()
Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

20 MAR 13 PM 11:26
RECEIVED
STATE
SECRETARY
OF
CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
20 MAR 13 AM 11:26
CLERK OF THE STATE

FIVESTAR COMPANY 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 12/30/2019 and assigned
Florida document number L20000006961.

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

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>	<u>Type of Action</u>
AMBR	RAMIREZ, JUAN C	7476 WOODBORN CT	<input type="checkbox"/> Add
		WINTER PARK, FL 32792	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ABREU, MARY E	7476 WOODBORN CT	<input type="checkbox"/> Add
		WINTER PARK, FL 32792	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RAMIREZ CORREA, JUAN C	7476 WOODBORN CT	<input checked="" type="checkbox"/> Add
		WINTER PARK, FL 32792	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ABREU PENA, MARY ELENA	7476 WOODBORN CT	<input checked="" type="checkbox"/> Add
		WINTER PARK, FL 32792	<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

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

The name of the members have to be change for bank purposes.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 (3)(b)

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.

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.

Dated March 4th 2020

Franklin

Signature of a member or authorized representative of a member

RAMIREZ, JUAN C

Typed or printed name of signee

Filing Fee: \$25.00