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AUG 1 9 2020 S. YOUNG

COVER LETTER

TO:

Registration Section Division of Corporations

GOLD STA	AR DEVELOPMENT LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	YOANDRYS AQUINO A	BREU	
		Name of Person	
	GOLD STAR DEVELOP	MENT LLC	
		Firm/Company	
	2831 44TH ST SW		
		Address	
	NAPLES FL 34116		
		City/State and Zip Code	
	aquino198608@gmail.com		
	E-mail address: (to be used for future annual report noti	tication)
For further information c	oncerning this matter, please c	all:	
YOANDRYS AQUINO	ABREU	239 234-7507 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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 S Division of C P.O. Box 632	Section Corporations 27	Street Address: Registration Section of Coron The Centre of T	porations allahassee
Tallahassee, FL 32314 2415 N. Monroe Street, Suit			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GOLD STAR DEVELOPMENT LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	iny as it now appears on our records.) Liability Company)	1 21
The Articles of Organization for this Limited Liability Company Florida document number L20000070605 This amendment is submitted to amend the following:	were filed on	and assigned
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5321 27TH AVE SW	
(Principal office address MUST BE A STREET ADDRESS)	NAPLES FL 34116	<u>.</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 11665 COLLIER BLVI NAPLES FL 34116	D BOX 990095
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new registered
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 "L.L.C." 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) PO BOX 11665 COLLIER BLVD BOX 990095 NAPLES FL 34116 PO BOX 11665 COLLIER BLVD BOX 990095 NAPLES FL 34116		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
			□Remove
			Change
			Dadd
			□Remove
			□ Change
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Effective date, if other than the	date of fili	ng:			(optional))	
Effective date, if other than the If an effective date is listed, the date mu Note: If the date inserted in this b	st be specific ar	nd cannot be pri	or to date of filir	ng or more than 90	days after filing	.) Pursuant to 605.0)207 (
document's effective date on the E				y minig requirer	nents, this date	, will not be fistee	1 45
e record specifies a delayed effective	ze date, but no	ot an effective	time, at 12:01	a.m. on the ear	lier of: (b) T	he 90th day after t	the
rd is filed.							
04.05		2020					
Dated		2020	 •				
, /							
6.1							
	CCC-V	a mambar or au	horized represe	ntative of a momb	ver		
(_)	Signature of a	a member or au	thorized represe	ntative of a memb	oer		