

L20000212023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

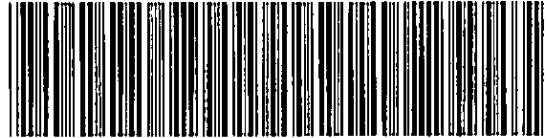
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/02/22--01011--005 **25.00

A. BUTLER

FEB 14 2022

Marco Donoso

Daytime Phone: 305-433-1533

Return Address: 617 N Rainbow Drive, Hollywood, FL 33021

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 5 STAR SERVICES USA 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:

MARCO A DONOSO

Name of Person

5 STAR SERVICES USA LLC

Firm/Company

4302 HOLLYWOOD BLVD #326

Address

HOLLYWOOD, FL 33021

City/State and Zip Code

info5star-service@llc@gmail.com

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

For further information concerning this matter, please call:

MARCO A DONOSO

305 433-1533
at ()

Name of Person

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

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

5 STAR SERVICES USA 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 07/20/2020 and assigned
Florida document number L20000212023.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

WISE OSO SERVICES LLC

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:

617 N RAINBOW DR

(Principal office address MUST BE A STREET ADDRESS)

HOLLYWOOD, FL 33021

Enter new mailing address, if applicable:

617 N RAINBOW DR

(Mailing address MAY BE A POST OFFICE BOX)

HOLLYWOOD, FL 33021

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:

N/A

New Registered Office Address:

617 N RAINBOW DR

Enter Florida street address

HOLLYWOOD

City

Florida 33021

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

MGR = Manager
AMBR = Authorized Member

MGR = Manager
AMBR = Authorized Member

[illegible]

[illegible]

(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)

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 JANURY 20TH, 2022

MARCO A DONOSO

Filing Fee: \$25.00

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MD BUSINESS GROUP INC

DOCUMENT NUMBER: P15000088387

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEPHANY M DONOSO
Name of Contact Person
MD BUSINESS GROUP INC
Firm/ Company
1099 N MILITARY TRL
Address
HAVERHILL, FL 33409
City/ State and Zip Code
MADG_1029@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEPHANY M DONOSO at (305) 433-1533
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
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