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C11D 1E7		10 Stars Ro				
SUBJEC	. 1;			ited Liability Company	.	
The enclo	osed	Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn:	all correspo	ndence concerning this matter	to the following:		
			Joe Karajian			
	Name of Person					
			10 Stars Roofing LLC			
				Firm/Company		
			8200 66th St N Suite 2A			
				Address		
			Pinellas Park Fl. 33781			
			info@10starshomes.com	City/State and Zip Code		
For furth	ier in	formation co	n-mail address: (oncerning this matter, please c	to be used for future annual repail:	sort nottheatton)	
Joe Karajian				844 707-	3773	
Name of Person			Person	at () Area Code	Daytime Telephone Number	
Enclosed	l is a	check for th	ne following amount:			
≡ \$25.0	00 Fi	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy Gaddmonal copy is enclosed.	ed) Certified	e of Status &
		ling Address istration S		<u>Street Add</u> Registrati	ress: on Section	
Division of Corporations			orporations	Division of Corporations		
P.O. Box 6327		1	The Centre of Tallahassee			

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

10 STARS ROOFING 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 tiled on $\frac{9/14/2020}{1}$ Florida document number_L20000286155 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 "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) 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

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
mgr	Empire Realty LLP	8200 66th St N #2A Pinellas Park, FL 33781	vdd
			■Remove
			□Change
ambr	Chant Karajian	8200 66th St N #2A Pinellas Park, FL 33781	□Add
			■Remove
			🗀 Change
mgr	Joe Karajian	8200 66th St N #2A Pinellas Park, FL 33781	≣Add
			□Remove
			[]Change
			C22TAdd
			🖟 Remove
			Change
			□Add
			□Remove
			□Change
			□Remove
			5707

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)

(If an effective date is fisted, 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)(6) 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.

Signature of a member Lauthorized representative of a member

Se Karajian

Filing Fee: \$25.00