

LZ1 000232545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

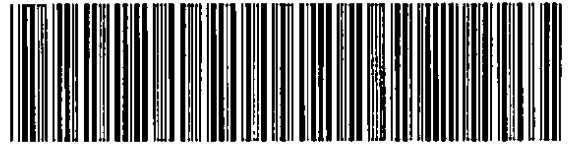
(Business Entity Name)

(Document Number)

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7/16/21  
[Signature]

2021 JUN 23 11:00 AM

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: StarcleaningKC 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:

Karell Mas Cossio  
Name of Person

StarcleaningKC LLC  
Firm/Company

1045 NE 42nd Place  
Address

Homestead, FL 33133  
City/State and Zip Code

StarcleaningKC@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karell Mas Cossio at ( 305 ) 502-9308  
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 &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

**(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 05/19/21 and assigned Florida document number L21000232545.

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

\_\_\_\_\_, 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**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

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

When I originally filed I only put one last name but I have two. The correct should be Karell Mas Cossio instead of just Karell Mas.

**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 June 01, 2021.

Karell Mas Cossio

Signature of a member or authorized representative of a member

Karell Mas Cossio

Typed or printed name of signee

# Florida

## DRIVER LICENSE



ABDUN M220-500-75-141-0

MAS COSSIO

KARELL

11045INE 42ND FL

WHEMESTEAD, FL 33033-3203

DOB 04/21/1975 SEX M

EXP 04/21/2026 HGT 6'00"

REST NONE END NONE

SAFE DRIVER

EX 07/24/2018

SEC X512104205473

REPLACED 04/20/2021

DESTROYED IF A PHOTO OR SIGNATURE IS NOT PRESENT  
UNLESS NOTED BY A VENDOR, SEE FLH 2007-001

