121000507533

(R	equestor's Name)			
(A	ddress)	<u></u>		
(A	ddress)	····		
(0)	:			
(C	ity/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				

Office Use Only



200381453042

02 11/25-- 11018--125 ++25.00

2022 APR 19 PM 4: 35

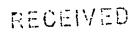
Statement Caredian Name Crang

MAY 1 1 2022

D CUSHING

COVER LETTER

TO: Registration Division of	s Section Corporations				
	Impact International Limited	Liability Company			
SUBJECT:	```	Name of Limited Liab	oility Company	_	
Dear Sir or Madam:					
The enclosed Statem	ent of Correction and fee(s) a	are submitted for filin	g.		
Please return all corr	espondence concerning this r	natter to the following	g:		
Erl Morrell-Stinson					
	Name of Person		_	i n	2(
Stellar Impact Intern	national LLC			:1 :3	2022 A
	Firm/Company		_	-: : : : : : : : : : : : : : : : : : :	APR I
612 Madison Ct					9
	Address		-		
Sarasota, FL 34236				- 4	F: 35
	City/State and Zip Code		_	• •	
Erl@MorrellStinson	ı.com				
E-mail address	: (to be used for future annua	report notification)	_		
For further informati	on concerning this matter, pl	ease call:			
Erl Morrell-Stinson		612	321-8309		
Na	me of Person	at (Area Code	Daytime Telephone Number	_	
Division of P.O. Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	e 810	
Enclosed is a check	for the following amount:				
■\$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status & Certified Copy		





2022 APR 19 PH 12: 23

Letter Number: 922A00004373

FLORIDA DEPARTMENT OF STATE TO Division of Corporations THELAL STEER FL

February 22, 2022

ERL MORRELL-STINSON 612 MADISON CT SARASOTA, FL 34236

SUBJECT: STELLAR IMPACT INTERNATIONAL LIMITED LIABILITY

COMPANY

Ref. Number: L21000507533

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist III

www.sunbiz.org

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. <u>FIRST</u>: The name of the limited liability company is: ____ The Florida Document number of the limited liability company is: 1.21000507533 **SECOND:** Document to be corrected is: THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Incorrect: The name ... is STELLAR IMPACT INTERNATIONAL LIMITED LIABILITY COMPANY Reason: I misunderstood the instructions, thinking the long version was required. Correct: The name of the Limited Liability Company is STELLAR IMPACT INTERNATIONAL LLC-OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u> Signature of Authorized Representative Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). 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. Registered Agent's Signature Filing Fee: \$25.00

Certified Copy:

\$30.00 (optional)