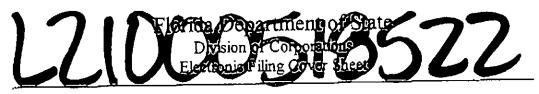
From: ATA Connector



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THERREL BAISDEN, LLP

Account Number : 120140000065 ; (305)371-5758 Phone

: (305)371-3178 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

adegraeve@me.com Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GLOWING STARS, LLC**

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S. PRATHER

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Help

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H21000451243

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	OF	EC TO
GLOWING STARS, LLC		m _C
(Name of the Limited Liability Co	ompany as it now appears on our records.) nited Liability Company)	FLORIDS and assigned
The Articles of Organization for this Limited Liability Completion document number <u>L21000518522</u>	pany were filed on 12/09/2021	and assigned G
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 th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, enter the n	name of the new registered
agent and/of the new segments		
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

12/10/2021 4:45:40 PM p. 4 of 5

From: ATA Connector

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>	Name	Address	Type of Action
MGR	JONATHAN FEUERMAN	ONE S.E. 3RD AVENUE, SUITE 2950	□Add
		MIAMI, FL 33131	■Remove
MGR	ALAIN DEGRAEVE	ONE S.E. 3RD AVENUE, SUITE 2950	= Add
		MIAMI, FL 33131	□Remove
			Change
			□Add
		□Remove	
			□ Change
			□Remove
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document's effective date on the Depart	ment of State's records.		: earliet of: (b) 1	The 90th day af	ter the
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