

November 16, 2023

Florida Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314-6327

Re: **Glimmer State LLC**

To Whom It May Concern:

Enclosed please find the following:

- Articles Of Amendment; and
- A check for \$30.00 for the filing fees payable to Florida Division of Corporations; and
- A pre-addressed return envelope. Please use it to return the filed documents to me.

If you have any questions or concerns regarding this filing, I can be reached at 800-706-4741 or wbalelo@andersonadvisors.com.

Thank you.

Wendy Balelo

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

Glimmer State 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 2/15/2023 and assigned Florida document number L23000083077.

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 "LLC."

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

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Star Tree Holding, LLC	1718 Capitol Ave., Cheyenne, WY 82001	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jaime Magne	2028 GREENWICH ST FALLS	<input type="checkbox"/> Add
		CHURCH, VA 22043	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Yusara Alvarez	2028 GREENWICH ST FALLS	<input type="checkbox"/> Add
		CHURCH, VA 22043	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Glimmer State 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:

Wendy Balelo

Name of Person

Anderson Business Advisors

Firm/Company

3225 McLeod Dr, Suite 100

Address

Las Vegas, NV, 89121

City/State and Zip Code

ra@andersonadvisors.com

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

For further information concerning this matter, please call:

Wendy Balelo

800 706-4741

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$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

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