L23000265137

(Pa	questor's Name)	
(Re	questors name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	: #)
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10/04/23--01031--015 **25.00



A. PARISHANI

OCT 1 4 2023

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DocuSign Envelo	pe ID: E54	B8AA4-9A8E)-4DE3-AD31-9	287A14CAF45

-			COVER LETTER	:	,
TO:	Registration Se Division of Cor		<u></u>		
SHDI		OMPANY LLC			
SUBJ	ECT	Name of Lin	ited Liability Company		2023 OCT - 1; AH 10: 0
The ei	ielosed Articles of	Amendment and feets) are sub	mitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:	:	AH II
		LEONARDO FIGUEIREI)()		01
			Name of Person		
		SOLUTION ADVISING	LLC		
			Firm/Company		
		5728 MAJOR BLVD, SU	ITE 609		
		·	Address	<u></u>	
		ORLANDO, FL - 32819			
		SERVICES(q SOLUTION)	City/State and Zip Code ADVISING.COM		
			to be used for future annual report notif	ication)	
For fu	rther information c	oncerning this matter, please c	all:		
LEONARDO FIGUEIREDO		407 286 5595 at ()			
	Name o	f Person	Area Code Daytime	Participation Telephone Number	_
Enclos	sed is a check for th	te following amount:			
■ \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filin Certificate Certified Co (additional co)	of Status &
	Registr Divisio P.O. Be	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Sectio Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32.	n ations nter Circle	

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ocuSign Envelope ID: E54B8AA4-9A8D-4DE	AKTIULES OF	F AMENDMENT	2023 OCT
		ro Obcanization	00
		ORGANIZATION	
	(OF	
STARR COMPANY L	10		
		p <mark>any as it now appears on our records</mark> I Liability Company)	AH 10 01
The Articles of Organization for thi	s Limited Liability Compan	y were filed on <u>05/31/2023</u>	and assigned
Florida document number 1.2300020	65137		-
This amendment is submitted to am	iend the following:		
A. If amending name, enter the n	new name of the limited lia	bility company here:	
The new name must be distinguishable and	f contain the words "Limited Liał	pility Company." the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices addre	ee if annliaahla:		
(Principal office address MUST B)	<u>e a street audress)</u>		
Enter new mailing address, if app	licable		
(Mailing address MAY BE A POS)	<u>TOFFICE BOA</u>		
			······
B. If amending the registered	agent and/or registered	office address on our records	ontor the name of the
registered agent and/or the new r	egistered office address he	re: <u>re</u> :	<u>enter ure name of the</u>
Name of New Registered /	Agent:		
<u>Ballet and Ballet and</u>			
	Idress		
New Registered Office Ad	ldress:	Enter Florida street address	<u>.</u>
	ldress:		rida

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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: E54B8AA4-9A8D-4DE3-AD31-9287A14CAF45 If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

.

,

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ANGELES IZZO LOMBARDI	13560 TURTLE MARSH LOOP Orlando, Fl 32837	🖬 Add
			Remove
			Change
		·	🗆 Add
			ORemove
			□€hange : :
			Add
			Change
			Add
		<u>_</u>	Remove
			Change
			Add
			Remove
<u> </u>			Add

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DocuSign Envelope ID: E54B8AA4-9A8D-4DE3-AD31-9287A14CAF45 D. Trainentong any other information, enter change(s) here: (Attach additional sheets, if necessary.) ADD AS A MEMBER: ANGELES IZZO LOMBARDI

VERYTHING ELSE STAYS THE SAME.	
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	2073 OC
	0: 0
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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	9/27/2023
Dated	
	Signature of a member of anither Peeprepresentative of a member
	Barbara Izzo Lombardi
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00