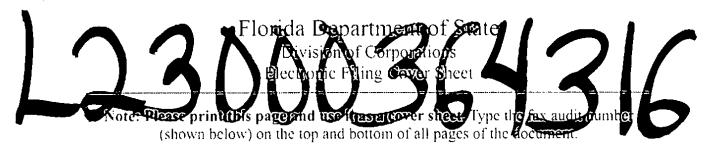
Division of Corporations



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From:

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M. SOLOMON

NOV 2 6 2024

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COVER LETTER

TO: Registration Section Division of Corporations

SUNSTAR INVESTIGATIONS LLC

SUBJECT:

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:

Mike Town

		Name of Person		
	Legalzoom.com, Inc.			
		Firm/Company		
	9900 Spectrum Dr			2021
		Address		2021, NOV
	Austin, TX 78717			26
		City/State and Zip Code		່ທີ່ ທະນຸ 10
	marc@sunstarinv.com			20m 70 11m 15 15
	E-mail address: (to be used for future annual report notifi	cation)	19 년 3 원년 3 원년
For further information of	concerning this matter, please ea	all:		
Mike Town		800 773-0888		
Name (of Person		Telephone Number	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To:

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

SUNSTAR INVESTIGATIONS LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited i	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000364316</u>	were filed on <u>08/02/2023</u>	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	10121 E ADAMO DR UNIT 89931		
(Principal office address MUST BE A STREET ADDRESS)	TAMPA, FL 33689		
		024	
Enter new mailing address, if applicable:	10121 E ADAMO DR UNIT 89931	2024 NOV 26	
` ' ' '	TAMPA, FL 33689	70 TO 11	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		er the name of the ne	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida		
	Cay	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as poing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I an provided for in Chapter 605, F.S. C	n familiar with and Fr. if this document is	

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>	Address	Type of Action
AMBR	WINKELJOHN, MARC A		□ Add
			☐ Remove
		10121 E ADAMO DR UNIT 89931 TAMPA, FL 33689	⊒ Change
			□ Remove
			☐ Change
			26 Clamge Com L
			☐ Remove
			□ Change
			D Add
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		-	□ Change
			☐ Remove
			□ Change

	Page: 11 of 35	2024-11-25 17:10 12 PST	13236068205	From: Rejiv
If amen	ding any other information	on, enter change(s) here: (Attach a	idditional sheets, if necessary.)	
				
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F ffectiv	e date lif other than the da	ate of filing:	(ontional)	
It an effec	tive date is listed, the date must b	e specific and cannot be prior to date of film	(optional) g or more than 90 days after filing.) Pursuant t	to 605.0207 (3)(b
	the date inserted in this block it's elfective date on the Depi		y filing requirements, this date will not be	e listed as the
	·			
he reco	rd specifies a delayed e	effective date, but not an effect	tive time, at 12:01 a.m. on the e	earlier of:
	Oth day after the recor			
_	. (2.5 (2.6.3.)			
Dated _	1/25/2024			
	/S/ Marc Winkel	JONN guature of a member or authorized represer		
	51	gnature of a meaniser of aumproved represer	лату с ига пістірії	
	Marc Winkeljohn			
		Typed or printed name of sig		

To: