

L24000229237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

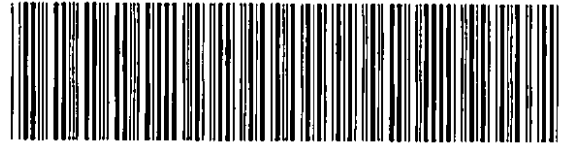
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA
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S. HUNT
5/2/24

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

~~PLEASE USE FUNDS FROM THIS ACCOUNT: 120210000160: SEE ATTACHED CHECK~~

~~AUTHORIZATION SIGNATURE:~~ _____

Crimson Star LLC L24000229237

BUSINESS (Name)

Document #

Walk in

Pick up time _____

Mail out

Will wait

Photocopy

Certified copies of

Certificate of Status

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NEW FILINGS

Profit

Not for Profit

Limited Liability

Domestication

INC

LLP

INC

AMMENDMENTS

Amendment

Resignation of R.A. Officer/Director

Change of Registered Agent

Dissolution/Withdrawal

Merger

Conversion

OTHER FILINGS

Annual Report

Fictitious Name

APOSTIL () _____
Country

REGISTRATION/QUALIFICATIONS

Foreign Filing

Limited Partnership

Reinstatement

Trademark

Other

EXAMINER'S INITIALS: _____

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CRIMINSON STAR 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:

GEORGE A. ALVAREZ ESQ.
Name of Person
LAW OFFICE OF GEORGE A. ALVAREZ
Firm/Company
9425 SUNSET DRIVE, SUITE 100
Address
MIAMI, FLORIDA 33173
City/State and Zip Code
GEORGE@GAALAWFIRM.COM
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL
JUN 12 AM 9:46
CD

For further information concerning this matter, please call:

GEORGE A. ALVAREZ at (305) 270-1000
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

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

CRIMINSON STAR 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 MAY 17, 2024 and assigned Florida document number 124000229237.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CRIMSON STAR LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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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>
MGR	HELEN GONZALEZ	10013 SW 77 COURT	<input type="checkbox"/> Add
		MIAMI, FLORIDA 33156	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	ANGELINA S. BREWTON	10013 SW 77 COURT	<input type="checkbox"/> Add
		MIAMI, FLORIDA 33156	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	NADIA S. BREWTON	10013 SW 77 COURT	<input type="checkbox"/> Add
		MIAMI, FLORIDA 33156	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2010
 DEPARTMENT OF STATE
 TALLAHASSEE, FL
 AH 9:46

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

2024 JUL 12 AM 9:46 DEPT OF STATE TALLAHASSEE, FL

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 July 10, 2024.

Signature of Helen Gonzalez

HELEN GONZALEZ
Typed or printed name of signee