

L24000244696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

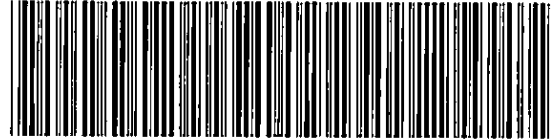
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2023 JUN 21 PM 12:22
STATE
TALBOT COUNTY

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INTERSTELLAR YACHT MANAGEMENT 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:

JOSE L VEGA
Name of Person

INTERSTELLAR YACHT MANAGEMENT LLC
Firm/Company

2702 N Nob Hill Rd.
Address

SUNRISE FL 33322
City/State and Zip Code

INTERstellarym1@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE L VEGA at (786) 239-6956
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|---|---|--|--|

Mailing Address:

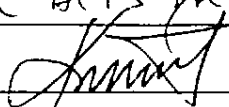
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2024 JUN 21 PM 12:22
STATE OF FLORIDA
DIVISION OF CORPORATIONS

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

I am Katherine Vega MGR of Interstellar Yacht
Management Appoint JESE L Vega to be the new
MGR = Manager of Interstellar Yacht Management LLC.
and he accepts all obligations of the position.
Since he is the Owner of Interstellar Yacht Management LLC.


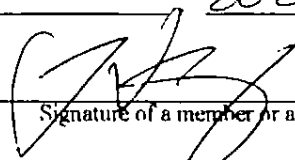
E. Effective date, if other than the date of filing: _____ (optional)

(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 June 3rd 2024.



Signature of a member or authorized representative of a member

JESE L Vega

Typed or printed name of signee

2024 JUN 21 PM 12:22
DEPT. OF STATE

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

INTERSTELLAR YACHT MANAGEMENT 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 28th 2024 and assigned Florida document number L24000244696

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 "L.L.C."

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

FILED
JUN 21
12:22
STATE
OFFICE

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 | Katherine Vega | 9662 NW 30th pl Coral | <input type="checkbox"/> Add |
| | | Springs FL 33065 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | JESE L Vega | 2702 N Nob Hill Rd | <input checked="" type="checkbox"/> Add |
| | | Sunrise FL 33322 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| OWNER | JESE L Vega | 2702 N Nob Hill Rd | <input checked="" type="checkbox"/> Add |
| | | Sunrise FL 33322 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| Authorized member | JES L Vega | 2702 N Nob Hill Rd | <input type="checkbox"/> Add |
| | | Sunrise FL 33322 | <input checked="" type="checkbox"/> Remove |
| | | | <input 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 |