Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Name : VCORP SERVICES, LLC

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Emmil	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STARR FIRE ENTERPRISE, LLC

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Corporate Filing Menu

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

- SECTION I (1-3 must be completed)

1.	Name of limited liability company as it appears on the records of the Florida Department of State: STARR FIRE ENTERPRISE, LLC						
2.	Jurisdiction of its organization: Nevada						
3.	Date authorized to do business in Florida: 02/15/2013						
	SECTION Π (4-7 complete only the applicable changes)						
4,	4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization?						
5.	New name of the limited liability company: (must end with "Limited Liability Company, ""L.L.C.," or "LLC.")						
FI th	name unavailable, enter alternate name adopted for the purpose of transacting business in orida and attach a copy of the written consent of the managers or managing members adopting alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." "LLC.")						
6.	If the amendment changes the period of duration, indicate new period of duration:						
7.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:						
8.	If the amendment corrects any false statement, indicate the statement being corrected—and the correction: This amendment is submitted to smand Article 7 relating to the principal office address of the LLC is as follows:						
T	ne address within of the principal office is: 2517 Centergate Drive #201, Miramar, FL 33025						
9.	Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction ur the law of which this entity is organized.	ider 값					
	Signature of a member or the authorized representative of a member	FEB 20	13124				
	Octavious Thomas, Member						
	Typed or printed name of signee	္ ယ္					
	Filing Fee: \$25.00	: 34					