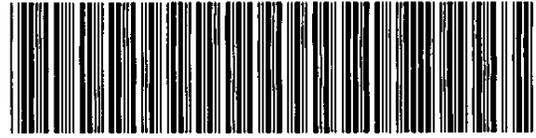


M13000004696



600274422476

09/08/15--01001--015 \*\*25.00

(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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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
15 SEP -4 PM 2:47  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

FILED  
15 SEP -4 AM 9:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**Wolters Kluwer**  
Corporate Legal Services

**CT Corporation**

515 East Park Avenue  
Tallahassee, FL 32301

850 558 1930 tel  
855 637 1628 fax  
www.ctcorporation.com

September 4, 2015

Department of State, Florida  
Clifton Building  
2611 Executive Center Circle  
Tallahassee FL 32301

Re: Order #: 9684698 SO  
Customer Reference 1: TrustHouse Services Group  
Customer Reference 2: Project Galaxy Qualificat

Dear Department of State, Florida :

Please obtain the following:

Starr Restaurants Catering Group MAM, LLC (DE)  
Evidence of Amendment  
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092 .

Thank you very much for your help.

Sincerely,

Connie R Bryan  
Senior Fulfillment Specialist  
Connie.Bryan@wolterskluwer.com

*(File 2nd)*

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Starr Restaurants Catering Group MAM, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elizabeth H. Fernandez  
Name of Person

Parker Poe Adams & Bernstein LLP  
Firm/Company

401 S. Tryon Street, Suite 3000  
Address

Charlotte, NC 28202  
City/State and Zip Code

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

For further information concerning this matter, please call:

Elizabeth H. Fernandez at (704) 335-9053  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 8, 2015

CT CORPORATION SYSTEM

SUBJECT: STARR RESTAURANTS CATERING GROUP MAM, LLC  
Ref. Number: M13000004696

We have received your document for STARR RESTAURANTS CATERING GROUP MAM, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 515A00018853

**\*RE-SUBMIT\***  
Please retain original filing  
date of submission 9/4

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of State: Starr Restaurants Catering Group MAM, LLC
2. The Florida document number of this limited liability company is: M13000004696
3. Jurisdiction of its organization: Delaware
4. Date authorized to do business in Florida: 07/15/2013

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: Galaxy Restaurants Catering Group MAM, LLC  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. 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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

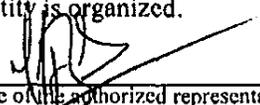
\_\_\_\_\_

**FILED**  
15 SEP -4 AM 9:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Michael Bailey	4135 South Stream Blvd. Suite 250 Charlotte, NC 28217	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Starr Restaurants Catering Group, LP	134 Market Street Philadelphia, PA 19106	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

  
 \_\_\_\_\_  
 Signature of the authorized representative  
**Michael Bailey, Manager**  
 \_\_\_\_\_  
 Typed or printed name of signer

Filing Fee: \$25.00

FILED  
 15 SEP -4 AM 9:12  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "STARR RESTAURANTS CATERING GROUP MAM, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "GALAXY RESTAURANTS CATERING GROUP MAM, LLC" ON THE TWENTY-SIXTH DAY OF AUGUST, A.D. 2015, AT 7:24 O`CLOCK P.M.



5326971 8320  
SR# 20150028506

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 10001147  
Date: 09-06-15