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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEW STAR VENTURES LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

CHARLES GENTRY

Name of Person

ACCOUNTING AND TAX ASSOCIATES

Firm/Company

1903 N HERCULES AVE

Address

CLEARWATER, FLORIDA 33763

City/State and Zip Code

CHARLIE@ACCOUNTINGANDTAXPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHARLES GENTRY

727
at (_____) _____

230-6964

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

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

STREET ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

245-
6027
245-
6813

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. NEW STAR VENTURES LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

NEW STAR VENTURES OF TAMPA LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. NEW YORK 3. 45-4612686
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2825 W FOUNTAIN BLVD 2825 W FOUNTAIN BLVD
(Street Address of Principal Office) (Mailing Address)
TAMPA, FL 33609 TAMPA, FL 33609

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

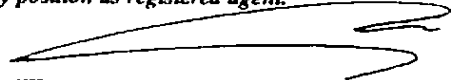
Name: VICTOR NISSIM

Office Address: 2825 W FOUNTAIN BLVD

TAMPA 33609
(City) , Florida (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, 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.


(Registered agent's signature)

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8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

AMBR

VICTOR NISSIM

2825 W FOUNTAIN BLVD

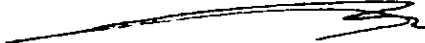
TAMPA, FL 33609

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(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Signature of an authorized person.

VICTOR NISSIM

Typed or printed name of signer

State of New York
Department of State } ss:

I hereby certify, that NEW STAR VENTURES LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 02/15/2012, and that the Limited Liability Company is existing so far as shown by the records of the Department. I further certify the following:

A Biennial Statement was filed 08/18/2014.

A Certificate of Amendment was filed on 01/20/2015.

A Certificate of Publication of NEW STAR VENTURES LLC was filed on 03/19/2015.

Certificate of Change was filed on 04/20/2015.

The Biennial Statement is past due.

I further certify, that no other documents have been filed by such Limited Liability Company.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 30th day of January
two thousand and nineteen.*

A handwritten signature in black ink, reading "Whitney Clark".

Whitney Clark
Deputy Secretary of State