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BIVISION OF CORPORATION

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(10 8/11/11

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: _	A PLUS BRIGHTSTAR ENTERPRISES, INC	<u> </u>
DOCUMENT NUMBER:	P07000070602	<del></del>
The enclosed Articles of Amendme	ent and fee are submitted for filing.	
Please return all correspondence co	oncerning this matter to the following:	
	JEAN-BAPTISTE, LEON A.	
	Name of Contact Person	
<del> </del>	Firm/ Company	
	8624 NW 24th COURT	
	Address	
and the state of the	CORAL SPRINGS, FL 33065	
	City/ State and Zip Code	
E-mail addr	leomar17@bellsouth.net ress: (to be used for future annual report notification)	
For further information concerning		
JEAN-BAPTISTE, LEC	ON A. at ( 954 ) 802-1071  Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	<u></u>
Enclosed is a check for the following	ng amount made payable to the Florida Department of State:	
☑ \$35 Filing Fee ☐ \$43.75 Filing Certificate o	of Status Certified Copy Certificate of (Additional copy is enclosed) Certified Copy	f Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

T-11-1---- PI 20201

## Articles of Amendment to Articles of Incorporation of



(Name of Corporation as cu		<del> </del>	· · · · · · · · · · · · · · · · · · ·	
<del></del>	7000070602		<u>pu oi omių</u> )	
<del> </del>	umber of Corpora			
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation		utes, this <i>Florid</i>	a Profit Corporation a	dopts the following
A. If amending name, enter the new name	of the corporati	on:		
ALLSTAR	S ENTERPRIS	SES, INC		The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or t name must contain the word "chartered," "p	he designation "(	Corp," "Inc," o	r "Co". A professiona	
B. Enter new principal office address, if a		N/A		
Principal office address <u>MUST BE A STRI</u>	<u>SET ADDRESS</u> )			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		SECRETARY CORDIVISION OF COR
D. If amending the registered agent and/o new registered agent and/or the new re			orida, enter the name o	OF STATE OF
Name of New Registered Agent:	N/A			
New Registered Office Address:	(Flo	rida street addro	ess)	
	N/A		, Florida	
(Ci		v)	(Zip Code)	
New Registered Agent's Signature, if chan hereby accept the appointment as registered.	ging Registered d agent. I am fan Signature of Ne	niliar with and a		the position.

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>N/A</u>			☐ Add☐ Remove
(attach ad N/A	dditional sheets, if necessary). (	(Be specific)	
provisi	nendment provides for an excha ons for implementing the amend ot applicable, indicate N/A)		
N/A	oi applicable, inalcale N/A)		
			,

The date of each amendment(	s) adoption: _	AUGUST 5, 2011
Effective date if applicable:		(date of adoption is required) AUGUST 15, 2011
	(no more than	90 days after amendment file date)
Adoption of Amendment(s)	( <u>C</u> 1	HECK ONE)
The amendment(s) was/were by the shareholders was/were		e shareholders. The number of votes cast for the amendment(s) approval.
		he shareholders through voting groups. The following statemen g group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the ame	ndment(s) was/were sufficient for approval
by		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)	
The amendment(s) was/were action was not required.	e adopted by the	e board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the	e incorporators without shareholder action and shareholder
Dated	AUGUST	5, 2011
Signature	M	West and the second
selec	ted, by an inco	dent or other officer – if directors or officers have not been rporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		JEAN-BAPTISTE, LEON A.
	(Т)	ped or printed name of person signing)
		PTD
	(Title o	of person signing)