P10000079815

(Requestor's Name)
(Address)
(Address)
(0) (0) (2) (1)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900316859299

03/13/18--01023--002 **35.00

SOMERAL OF SASS

AUG 15 277





COVER LETTER

TO: Amendment Section

Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Star Field Ses DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address**

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

Star Field	& Dervic	e Cop.
(Name of Corporati	tion as currently filed with the	Florida Dept. oFState)
(Docum	Ment Number of Corporation (if	(known)
Pursuant to the provisions of section 607,1006, Florid its Articles of Incorporation:	•	~` <i>,</i>
A. If amending name, enter the new name of the co	orporation:	The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	v," "Inc," or "Co". A profess	
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BC</u>	2 <u>X</u>)	
D. If amending the registered agent and/or registe new registered agent and/or the new registered		enter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		the obligations of the position.
Sigr	nature of New Registered Agent,	. if changing

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held, President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Mike Jones, V as Kemo	ve, ana sauy smu	n, 5V as an Aaa.	
Example: N Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>vr</u>	Ulises Ropes	Loy Lango Pl 3303
Remove			* cy cocyo
2) Change			
Add			<u></u>
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
le	hanna malamiGantian an annuallation of issued charge
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Adment if not contained in the amendment testi-
(,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	Stalia
Effective date <u>if applicable</u> :	0/ 1/18
	(no more than 90) days after amendment file date)
Note: If the date inserted in this block does not document's effective date on the Department of St	meet the applicable statutory filing requirements, this date will not be listed as the ate's records.
Adoption of Amendment(s) (CHE	CK ONE)
The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for app	archolders. The number of votes cast for the amendment(s) proval.
	shareholders through voting groups. The following statement roup entitled to vote separately on the amendment(s):
"The number of votes cast for the amend	ment(s) was/were sufficient for approval
by	"
(votin _i	g group)
The amendment(s) was/were adopted by the boaction was not required.	pard of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the in- action was not required.	corporators without shareholder action and shareholder
Dated 8/7/18	
Signatura Velego	~ Kajos
(By a directour preside	ent or other officer – if directors or officers have not been
selected, by an incorp appointed fiduciary b	porator – if in the hands of a receiver, trustee, or other court
appointed indiciary (y that ridde arryy
<i>Hn</i>	gela Rojas
(†4	sped or printed name of person signing)
	resident
	(Title of person signing)