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COVER LETTER

Division of Corporations
NAME OF CORPORATION: Starlite Entertainment & Party Planning Incomment Number: P130000 16235
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael Stridarchio Name of Contact Person Starlite Entertain ment & Party Planning Inc. 1235 R Providence Blvd. STE R #12. Address DELTONA, FC 32725 City/ State and Zip Code Starlite promos@ Yahoo. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Stridacchio at 386 574-4958 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Street Address Amendment Section

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Articles of Amendment

Articles of Inc	orporation
Starlite Entertainme	at & Party Planning Inc.
(Name of Corporation as currently filed with the F	lorida Dept, of State)
P13000016239	
(Document Number of Corporation (i	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The way
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered." "professional association," or the abbreviation "	Co". A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	DELTONA, FL 32738
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1235 R Providence Blud STE R#12 DELTONA, FC 32725
D. If amending the registered agent and/or registered office address Name of New Registered Agent Michael S (Florida str.) New Registered Office Address: DE CTON	
(City) New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. If any familiar	· · · · · · · · · · · · · · · · · · ·

Signature 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.

Example:	ro, and ban, billing	, 5. 45 47,744	
X Change	<u>PT</u> <u>John [</u>	Doe	
X Remove	<u>V</u> <u>Mike</u> ,	<u>Jones</u>	
X Add	SV Sally	<u>Smith</u>	
Type of Action	<u>Title</u>	Name	<u>Addres</u> s
(Check One) 1) Change	PVST	Nola Robles-Mull	Delomy F/32713
Add			Debmy F/32713
Remove	PVST	Michael Stadocho	12250 Parts Bud
2) Change	1	Michael Billion Colle	1235 R Providence Bud STE R# 122 DELTUNA, FL 32725
Remove			DELTONA, FL 32725
3) Change			
Remove			
4) Change			
Add			
Remove			
5) Change Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change((Be specific)			
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f an amendment provides for an excl	iange, reclassificati	on, or cancellati	on of issued shares	1
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not cont	ained in the a <u>me</u>	ndment itself:	
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(y ma apparaole, maicine 1971)				
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The date of each amendment(s date this document was signed.) adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 91) days after amendment file date)	war.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
the amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	east for the amendment(s) was/were sufficient for approval	
by	ņ	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
Dated	11/15/2013	
Signature 🖊	Mel Shirth	<u></u>
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	/
	Michael Stridacchio	
	(Typed or printed name of person signing)	
	Michael Stridachio (Typed or printed name of person signing) PVST	
	(Title of person signing)	_