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Department of Corporations

Attention; Cheryl.

I call to find out the status I was told page 4 was wrong and to do it over.

I have revised the forms

Thank You Constance Baker

COVER LETTER

Division of Corporations NAME OF CORPORATION: STARIGHT CONSUMER SEIVLES INC

DOCUMENT NUMBER: P 14000 49821 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JANET SHERFORD

Name of Contact Person STARIGHT CONSUMER SECULES INC Firm/Company 10151 UNIVERSITY BIVD #17)
Address OCIANDO FC 32817
City/ State and Zip Code STATISHT CONSMESSIVE DYAHOD. (OM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (866) 840 3398 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

Street Address

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

Articles of Amendment to Articles of Incorporation

Articles of Incorporation HT CONSUMER Secules I.
Name of Corporation as currently filed with the Florida Dept. of State) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent

| DANET SHERODO
| DOSSUM | New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 <math>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: X Change	<u>PT</u>	John D	<u>oe</u>			
X Remove	<u>v</u>	Mike Jo	ones			
X Add	<u>sv</u>	Sally S	<u>mith</u>			
Type of Action (Check One)	Title		Name		<u>Address</u> s	
1) Change	P		Constan	ce BAXER	- 10151 UNIVERSITY	BIUP
Add Remove					SUITE 171 DILANDOFL 3281	17
2) Change	VP		JAnet	SHerrord	10151 University Suite 171	BUF
Remove					OMANDO FI 3281	5
3) Change Add				 		
Remove						
4) Change Add		<u>.</u> .				
Remove						
5) Change		_				
Add						
6) Change		-				
Add						
Remove						

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	
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If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, indment if not contained in the amendment itself:	
(y nos appricados, maicase 1811)		

The date of each amendment(s) adoption:date this document was signed.	11-23-114	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amena	lment file date)
Note: If the date inserted in this block does a document's effective date on the Department of		g requirements, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		ast for the amendment(s)
The amendment(s) was/were approved by the must be separately provided for each voting	ne shareholders through voting groups, g group entitled to vote separately on	. The following statement the amendment(s):
"The number of votes cast for the ame	ndment(s) was/were sufficient for app	roval
by	ting group)	. п
The amendment(s) was/were adopted by the action was not required.		er action and shareholder
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder act	tion and shareholder
Dated 11-23-1		
selected, by an inc	sident or other officer – if directors or orporator – if in the hands of a received by by that fiduciary)	
Cor	VSTANCE BAK (Typed or printed name of person sign	CR
_	Cesi Den Y	ung,
	(Title of person signing)	