P16000051327

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Ver Kerta that the startest with McCarty Managers. She would have to she will be a sound on the startest with the startest with the same of the startest with the same of the same o

Office Use Only



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S. TALLENT OCT 10 2016

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TO DELL'S PH 3: 3:

SECRETARY OF STATE

TALLAMASSEE FLOORING

Mc & Mong.



September 20, 2016

STARLA McCARTY A STAR SYSTEMS, INC. 11851 54TH STREET N ROYAL PALM BEACH, FL 33411

SUBJECT: A STAR SYSTEMS, INC

Ref. Number: P16000051327

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The current name of the entity is as referenced above. Please correct your document accordingly.

The capacity of the officer/director signing should be indicated. Ex. President, Vice President, Chairman of the Board, etc.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 616A00020179

Rec 10/5/16

September 29, 2016

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Subject: A Star Systems, Inc. Ref. Number: P16000051327

Dear Sirs:

Enclosed please find the corrected information that you requested. Thank you for your help in this matter.

Sincerely.

Starla McCarty, Pres.

A Star System, Inc.

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: A Star Systems, In	nc.	
DOCUMENT NUMBE	P16000051327		
The enclosed Articles of	Amendment and fee are su	abmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
s	tarla McCarty		
		Name of Contact Persor	1
A	Star System, Inc.		
-		Firm/ Company	
1	1851 54th Street N.	1	
		Address	
F	toyal Palm Beach, FL 3341	1	
		City/ State and Zip Code	e
RoyalP	almIceCream@gmal.om		V
	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, plea	se call:	
Starla McCarty		at (de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

A Star Systems, Inc.	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P16000051327	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
A Star System, Inc 🗸	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	11328 Okeechobee Boulevard, #4
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Royal Palm Beach, Florida 33411
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 registered agent and/or the new registered office address Name of New Registered Agent	
(Florida si	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen 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 Do	<u>be</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	<u></u>			
Add				
Remove				
2) Change				
Add				
Remove				
3) Change			· · · · · · · · · · · · · · · · · · ·	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

Attacinaaamonai	lding additional A sheets, if necessary,					
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<u>provisions for in</u>	provides for an ex plementing the an able, indicate N/A)	nendment if not c				
	····		<u>. </u>		12000-2-1	
· · · · ·						

	9/30/16	
The date of each amendment(s) acd date this document was signed.	loption:	, if other than th
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	clock does not meet the applicable statutory filing requirements, this date we partment of State's records.	rill not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
9/29/16 Dated		
Signature	irector, president or other officer – if directors or officers have not been	
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other court ded fiduciary by that fiduciary)	
	Starla McCarty	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	