P17000019965

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COVER LETTER

SECRETARY OF STATE OF STATE OF CORPORATION OF CORPORATION

TO: Amendment Section Division of Corporations

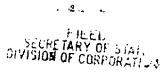
P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPO	RATION: NU STAR, INC			
DOCUMENT NUM	P17000019965			
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	MAYLIN POZO			
		Name of Contact Persor	1	
		Firm/ Company		
	7943 NW 188 LN			
		Address		
	HIALEAH, FL 33015			
	City/ State and Zip Code			
JAV	TZA1989@GMAIL.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
MAYLIN POZO		at (786	de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or 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)	
	iling Address		Address	
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations		

Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



MR HAY 16 AH II: 40

NU STAR INC

NO STAIC INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P17000019965	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	" "company," or "incorporated" or the abbreviation or A professional corporation name must contain the
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)	
(muning duriess <u>MAT DE ATOST OF FICE DOS</u>)	
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
Thereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing
and the second s	

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: X Change	<u>PT</u> .	i <u>ohn Doe</u>	
X Remove	<u>V</u> 2	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	JAVIER ZAMORA	7943 NW 188 LN
X Add	 -		HIALEAH, FL 33015
Remove			
2) Change			
Add			
Remove			<u> </u>
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u></u>	
Add			
Remove			

. If amending or adding a (Attach additional sheets,			_		
N/A					
	•				
 					
· ·	<i>//</i>				
		<u> </u>			
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				-	
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				·	
. If an amendment provid	des for an exchange,	reclassification, o	r cancellation of is	ssued shares,	
provisions for impleme (if not applicable, is		t if not contained	in the amendmen	t itselt:	
₹/A	,,,,,,				
					
					
<u></u>					
-			· · · · · · · · · · · · · · · · · · ·		
					

	MAY 10th, 2018	
) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> : _	MAY 10th, 2018	
Effective date <u>if appricable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements. Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the ame e sufficient for approval.	endment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendmen	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	; •	
<u></u>	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sl	hareholder
nation was not required	adopted by the incorporators without shareholder action and shareh	nolder
Dated	2000	
Signature	2400	
(By	a director, president or other officer – if directors or officers have rected, by an incorporator – if in the hands of a receiver, trustee, or officer fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Title of person signing)	