| (Requestor's Name)                      |             |               |
|---|-------------|---------------|
| (Address)                               |             |               |
| (Address)                               | 100307      | 129871        |
| (City/State/Zip/Phone #)                |             |               |
|   |             |               |
| (Business Entity Name)                  |             |               |
| (Document Number)                       | 01/02/18010 | 22006 ++35.00 |
| Certified Copies Certificates of Status |             |               |
| Special Instructions to Filing Officer: |             | 18            |
|   |             | JAN - S       |
|   |             | 2 PH          |
|   |             | 4:36          |
| Office Use Only                         |             |               |

## COVER LETTER

**TO:** Amendment Section

Division of Corporations

| NAME OF CORPORATION: | _Star | Inc      |     |
|----------------------|-------|----------|-----|
| DOCUMENT NUMBER:     |       | 17000096 | 142 |

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The enclosed Articles of Amendment and fee are submitted for tiling.

Please return all correspondence concerning this matter to the following:

| TBASANT AGARWAL           |
|---------------------------|
| Name of Contact Person    |
| BASANT AGARWAL CPA        |
| Firm Company              |
| 5200 W Newberry Rd. # D4  |
|                           |
| Grainesville FL 32607     |
| City State and Zip Code   |
| BASANTAGARWAL @ YAHOO LOM |

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 BASANT
 AGARWAL.
 at (\_\_\_\_\_352)
 246
 867-9

 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

□\$43.75 Filing Fee & Certificate of Status

□S43-75 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 Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

| Artie   | eles of Amendment                      |                           |                |            |
|---|--|---------------------------|----------------|------------|
| Artick  | to<br>es of Incorporation              |                           |                |            |
|   | of                                     |                           |                |            |
| 7_Sto   | m Inc                                  |                           |                |            |
|   | currently filed with the Florid        | da Dept. of State         | )              |            |
|   | umber of Corporation (if know          | <u> </u>                  | ···-           |            |
|   |  |                           |                |            |
| Pursuant to the provisions of section 607,1006, Florida Statu<br>as Articles of Incorporation:  | les, this <i>Florida Profit Corpor</i> | <i>ation</i> adopts the 1 | offowing amend | ment(s)    |
| . If amending name, enter the new name of the corpora   | ition:                                 |                           |                |            |
|   |  | <u>.</u>                  | Then           |            |
| name must be distinguishable and contain the word "con<br>"Corp.," "Inc.," or Co.," or the designation "Corp." "hu<br>word "chartered." "professional association." or the abbrev | e," or "Co" A professional             |                           |                |            |
| <ol> <li>Enter new principal office address, if applicable:<br/>Principal office address <u>MUST BE A STREET ADDRESS</u></li> </ol>   | <u>.</u>                               |                           |                | _          |
|   |  |                           |                | _          |
| C. <u>Enter new mailing address, if applicable:</u><br>(Mailing address <u>MAY BE A POST OFFICE BON</u> )   | <u> </u>                               |                           |                | -          |
| <ol> <li>If amending the registered agent and/or registered off</li> </ol>  | fice address in Flurida, enter         | the name of the           |                | _          |
| new registered agent and/or the new registered office   |  |                           |                |            |
| Name of New Registered Agent  |  |                           |                |            |
|   |  |                           |                |            |
|   | horida street address)                 |                           |                |            |
| <u>New Registered Office Address</u> :  |  | , Florida                 |                | _          |
|   | (Cin)                                  |                           | (Zip Code)     |            |
|   |  |                           |                |            |
| Sew Registered Agent's Signature, if changing Registered<br>hereby accept the appointment as registered agent. I am fi  |  | liaations of the no       |                |            |
|   |  | agailonn of or po         | 8              |            |
|   |  |                           | LAN LAN        | 7.74       |
| Simutare  | J New Registered Agent, if cha         | maina                     |                |            |
|   | a new oczonereu ngem, ij enu           | 111 July 111 July 1       |                | 900 -      |
|   |  |                           |                | < <b>3</b> |
|   |  |                           | 4:36           |            |

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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:

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(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. It 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 Doc 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:

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| <u>X</u> Change                      | <u>PT</u> <u>John</u>  | <u>1 Doc</u>   |                 |       |
|--------------------------------------|------------------------|----------------|-----------------|-------|
| <u>X</u> Remove                      | <u>V</u> <u>Mik</u>    | e Jones        |                 | ,     |
| <u>X</u> Add                         | <u>SV</u> <u>Sally</u> | <u>y Smith</u> |                 |       |
| <u>Type of Action</u><br>(Check One) | Title                  | Name           | Address         |       |
| 1) Change                            | $\overline{\supset V}$ | ELSIS M        | M BERRIOS       |       |
| _X Add                               |                        |                | 10330 Chedonk   | ⊂ŧ.   |
| Remove                               |                        |                | Suite 101       |       |
| 2) Change                            |                        |                | Jacksonville FL | 32212 |
| Add                                  |                        |                |                 |       |
| Remove                               |                        |                |                 |       |
| 3) Change                            |                        |                |                 |       |
| Add                                  |                        |                |                 |       |
| Remove                               |                        |                |                 |       |
| 4) Change                            |                        |                |                 |       |
| Add                                  |                        |                |                 |       |
| Remove                               |                        |                |                 |       |
| 5) Change                            |                        |                |                 |       |
| Add                                  |                        |                |                 |       |
| Remove                               |                        |                |                 |       |
| 6) Change                            |                        |                |                 |       |
| Add                                  |                        |                |                 |       |
| Remove                               |                        |                |                 |       |

## E. If amending or adding additional Articles, enter change(s) here:

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(Attach additional sheets, if necessary), (Be specific)

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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

| <br>  |      |
|-------|------|
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|                         | e if applicable:   |
|-------------------------|--|
|                         | ino more than 90 days after amendment file dater   |
|                         | date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a<br>fective date on the Department of State's records   |
| Adoption of a           | Amendment(s) ( <u>CHECK ONE</u> )  |
| The amend<br>by the sha | Iment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) reholders was/were sufficient for approval.   |
|                         | lment(s) was/were approved by the shareholders through voting groups. The following statement parately provided for 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)   |
|                         | ivoung group)  |
|                         | Iment(s) was/were adopted by the board of directors without shareholder action and shareholder not required.   |
| action was              | not required.<br>Iment(s) was/were adopted by the incorporators without shareholder action and shareholder<br>not required.  |
| action was              | not required.<br>Iment(s) was/were adopted by the incorporators without shareholder action and shareholder   |
| action was              | not required.<br>Iment(s) was/were adopted by the incorporators without shareholder action and shareholder<br>not required.<br>Dated12115117   |
| action was              | not required.<br>Iment(s) was/were adopted by the incorporators without shareholder action and shareholder<br>not required.<br>Dated   |
| action was              | not required.<br>Iment(s) was/were adopted by the incorporators without shareholder action and shareholder<br>not required.<br>Dated12115117<br>Signature  |
| action was              | not required.<br>Iment(s) was/were adopted by the incorporators without shareholder action and shareholder<br>not required.<br>Dated   |
| action was              | not required.<br>Iment(s) was/were adopted by the incorporators without shareholder action and shareholder<br>not required.<br>Dated   |
| action was              | not required.<br>Iment(s) was/were adopted by the incorporators without shareholder action and shareholder<br>not required.<br>DatedI2_I15   |
| action was              | not required.<br>Iment(s) was/were adopted by the incorporators without shareholder action and shareholder<br>not required.<br>Dated12115117<br>Signature<br>(By a director, president or other officer) of directors or officers have not been<br>selected, by an incorporator - if in the hands of a receiver, trustee, or other court<br>appointed fiduciary by that fiduciary)<br>TSA SAMT AGMAM |

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