

XXXXXX 4/12/2022 @ 11:09am

Division of Corporations

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet
P18000022304

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000127074 3)))



H220001270743ABZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
 Doing so will generate another cover sheet.

To:

Division of Corporations
 Fax Number : (850)617-6380

From:

Account Name : GREENSPOON MARDER, P.A.
 Account Number : 076064003722
 Phone : (888)491-1120
 Fax Number : (954)333-4242

SECRETARY OF STATE
 TALLAHASSEE, FL

2022 APR 12 PM 2:35

FILED

2022 APR 12 PM 12:20

SECRETARY OF STATE
 TALLAHASSEE, FL

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: alexb@treasurehill.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN

ASTRA STAR USA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Note:

Amendment was rejected in error
 On April 26, 2022 spoke with MS
 User over the phone about the amendment
 Her direct line number is

Corporate Suffix

Electronic Filing Menu

Corporate Filing Menu

Help

527 6241
 AB 4/26/

APR 26 2022

H22000127074 3

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ASTRA STAR USA, INC.DOCUMENT NUMBER: P1800002234P18 000022304The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALEX C. BOTTONI, J.D.

Name of Contact Person

Firm/ Company

8700 DUFFERIN STREET

Address

CONCORD, ONTARIO L4K 4S6 CA

City/ State and Zip Code

alexh@treasurchill.com

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

For further information concerning this matter, please call:

Alex C. Bottoni

Name of Contact Person

at (416)987-5500 Ext 130

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☐ \$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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

H22000127074 3

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H22000127074 3

Articles of Amendment
to
Articles of Incorporation
of

2022 APR 12 PM 2: 35

SECRETARY OF STATE
TALLAHASSEE, FL

ASTRA STAR USA, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P18000022304

(Document Number of Corporation (if known))

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:

ASTRA STAR REALTY CORP.

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

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

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

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1) (c), F.S.

H22000127074 3

H22000127074 3

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:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	CEO / DIR	CARLO BALDASSARRA	8700 DUFFERIN STREET
<input type="checkbox"/> Add			CONCORD, ONTARIO
<input type="checkbox"/> Remove			L4K 4S6 CA
2) <input type="checkbox"/> Change	PRES.	NICHOLAS FIDEI	8700 DUFFERIN STREET
<input checked="" type="checkbox"/> Add			CONCORD, ONTARIO
<input type="checkbox"/> Remove			L4K 4S6 CA
3) <input type="checkbox"/> Change	DIR	NICHOLAS FIDEI	8700 DUFFERIN STREET
<input checked="" type="checkbox"/> Add			CONCORD, ONTARIO
<input type="checkbox"/> Remove			L4K 4S6 CA
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

H22000127074 3

F. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary) (Be specific)

[illegible]

H22000127074 3

H22000127074 3

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately 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)

Dated Jan 19, 2022

Signature: _____

(By a director, president or other officer -- if directors or officers have not been substituted; by an incorporator -- if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

NICHOLAS FIDEI

(Typed or printed name of person signing)

PRESIDENT/DIRECTOR

(Title of person signing)

H22000127074 3

Fax Server

4/12/2022 11:17:51 AM PAGE 2/009 Fax Server

850-617-6381

4/8/2022 4:43:58 PM PAGE 1/001 Fax Server

FAX AUDIT NUMBER: H22000127074 3



April 8, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ASTRA STAR USA, INC.
8700 DUFFERIN ST.
CONCORD, ON, CANADA L4K 4S6,

SUBJECT: ASTRA STAR USA, INC.
REF: P18000022304

**REVISED AND RESUBMITTED
04/12/2022**

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

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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

Querida R Silas
Regulatory Specialist II

FAX Aud. #: H22000127074
Letter Number: 022A00008259

P.O BOX 6327 - Tallahassee, Florida 32314

FAX AUDIT NUMBER: H22000127074 3



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2022

ALEX C. BOTTONI, J.D.
8700 DUFFERIN STREET
CONCORD ONTARIO LAK, CA 456

SUBJECT: ASTRA STAR USA, INC.
Ref. Number: P18000022304

We have received your document for ASTRA STAR USA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Anissa Butler
Regulatory Specialist II

Letter Number: 722A00008589