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Special Instructions to		
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Office Use Only



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J. FASON!
JUL 02 2021

COVER LETTER

TO: Amendment Section Division of Corporation	s'			
NAME OF CORPORATION	N: Rising Star Center	Согр		
DOCUMENT NUMBER: _				
The enclosed Articles of Am		bmitted for filing.		
Please return all corresponde	nce concerning this ma	tter to the following:		
		Isis E Padilla Galis Me	enendez	
		Name of Contact Pe	erson	
		RISING STAR CENTI	ER COR	RP.
		Firm/ Company	y	
		4600 SW 97 CT	Γ	
		Address		
		Miami, FL 3316	65	
		City/ State and Zip	Code	
		,		
_	starcenter2020@gmail.			
E	-mail address: (to be us	sed for future annual re	port not	ification)
For further information conc	erning this matter, plea	se call:		
Isis E Padilla Galis Memend	lez	786)	357-2675 & Daytime Telephone Number
Name of Con	tact Person	Area	a Code &	& Daytime Telephone Number
Enclosed is a check for the fo	ollowing amount made	payable to the Florida I	Departn	nent of State:
☐ \$35 Filing Fee ☐	343.75 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)
P.O. Box 6	nt Section f Corporations	An Div Th 24	vision o ne Centi 15 N. N	dress nt Section f Corporations re of Tallahassee Monroe Street, Suite 810 e. FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	on as currently filed with the Flo	rida Dept. of State)	
(Docum	ent Number of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpo	pration adopts the following	g amendment(s) to
A. If amending name, enter the new name of the co	rporation:		
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc.," "chartered," "professional association," or the abbre	' or "Co". A professional corpe	porated" or the abbreviation paration name must contain	_The new on "Corp.," n the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>		
D. If amending the registered agent and/or register new registered agent and/or the new registered of New Registered Agent		er the name of the	
	(Florida street address)		_
New Registered Office Address:	(City)	, Florida(Zip 0	Code)
New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent. Signa	istered Agent: I am familiar with and accept the o uture of New Registered Agent, if c		2021 (P**) - 1
Check if applicable The amendment(s) is/are being filed pursuant to s. 6	507.0120 (11) (e). F.S.		P:
			ယ ၂)

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)

Example:

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.

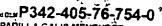
X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	ANTONIO II PADILLA GALIS	4600 SW 97 CT
Add	•			MIAMI. FL 33165
X Remove				
2) Change	<u>S</u>	_	Nilda Maria Carreras	4600 SW 97 CT
Add				MIAMI, FL 33165
X Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	is Menendez would like to remove and amend my vice president and Secretary from my corporation as I	
be Venturing	ng on my own. Thank You	
	-	_
		—
		_
lf an amendm	ment provides for an exchange, reclassification, or cancellation of issued shares,	
(if not ap	or implementing the amendment if not contained in the amendment itself: oplicable, indicate N/A)	
(9		
		—
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04/27/2021	
ent(s) adoption:	, if other than th
ed.	
04/27/2021	
<u> </u>	
(no more than 90 days after amendment file date)	
n this block does not meet the applicable statutory filing requirements, this date win the Department of State's records.	ll not be listed as the
s) (<u>CHECK ONE</u>)	
were adopted by the incorporators, or board of directors without shareholder action an	d shareholder
were adopted by the shareholders. The number of votes cast for the amendment(s) //were sufficient for approval.	
were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):	
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(voung group)	21
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04/27/2021	
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	2
appointed fiduciary by that fiduciary)	<u> </u>
Isis E Padilla Galis Menendez	
(Typed or printed name of person signing)	<u> </u>
Vice President	
(Title of person signing)	
	(no more than 90 days after amendment file date) In this block does not meet the applicable statutory filing requirements, this date win the Department of State's records. (CHECK ONE) Were adopted by the incorporators, or board of directors without shareholder action an evere adopted by the shareholders. The number of votes cast for the amendment(s) evere sufficient for approval. Were sufficient for approval. Were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s): (voting group) 04/27/2021 (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Isis E Padilla Galis Menendez (Typed or printed name of person signing) Vice President

Florida DRIVER LICENSE





P342-405-76-754-0 *CLASS E

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ZISIS SUL ALIA
MIAMI, FL 33165 2 COE 07/14/1976 158EX F 4 COE 07/14/1976 158EX F 12 REST NONE: SEED NONE

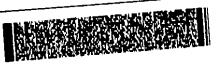
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Operation of a motor velocic constitutes consent to any sobrety lest required by lew

The State of Florida retains all property rights herein, 071475 Rev. 05/01/2019



EID: Horse

REPLACEMENT LICENSE REQUERED WITHIN 30 DAYS OF ADDRESS OR MAKE CHANGE. WWW.FL.HSMV.GOV