Paul		682
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _____ALL STAR ALF CORP

DOCUMENT NUMBER: P24000047682

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

Please return all correspondence concerning this matter to the following:

LILIANA SAINZ DE LA TORRE

Name of Contact Person

ALL STAR ALF CORP.

Firm/ Company

25425 SW 126th Ct

Address

Homestead, FL 33032

City/ State and Zip Code

SAINZ.LILIANA@yahoo.com

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

For further information concerning this matter, please call:

LILIANA SAINZ DE LA TORRE	786 at (438-7710
Name of Contact Person	Area Cod	le & 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 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

IL STAD ALCONDD 1

ALL STAR ALF CORP				
(<u>Name of Corporation as curr</u>	rently filed with the Florida D	ept. of State)		
P24000047682				
(Document Numł	per of Corporation (if known)	·		
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation	adopts the foll	lowing :	imendment(s) t
A. If amending name, enter the new name of the corporation	<u>n:</u>			
N/Λ			7	'he new
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "I	". A professional corporation P.A."			
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A			
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A		2024 SEP	
		•	6	च भ
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add		name of the	H I: 20	
Name of New Registered Agent	<u>.</u> .	VØ		
(Florie	la street address)		. *	

New Registered Office Address:		Florida	
	(City)		(Zip Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> *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 (11) (c), F.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 = Dircctor; 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> John Doe X Remove <u>V</u> Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Title Address Type of Action Name (Check One) Р YOLEXIS FUENTES 14815 LOUIS STREET 1) ____ Change MIAMI, FL 33176 Add Х Remove LILIANA SAINZ DE LA TÓRRE 14815 LOUIS STREET Р 2) Change MIAMI, FL 33176 X ____ Add Remove 3) _____ Change Add 4) ____ Change ____ Add Remove 51 _____ Change ____ Add ___ Remove 6) ____ Change _____ Add Remove

(Attach additio	or adding additional mal sheets, if necesso	ıry). (Be specifi	c)			
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. <u>If an amendm</u> provisions fo	tent provides for an or implementing the	<u>exchange, reclas</u> amendment if n	<u>sification, or can</u> of contained in th	icellation of issued	<u>l shares.</u> elf:	
(if not ap	plicable, indicate N/	A)				
∜/A 					<u> </u>	<u>. </u>
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	·····		<u> </u>	<u> </u>		
				<u> </u>		

. . .

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

	(voting group)	
SEPTEM	BER 04, 2024	
Dated		
Signature	auto:	
(By a	lirector, president or other officer - if director	s or officers have not been
select	ed, by an incorporator – if in the hands of a re-	ceiver, trustee, or other court-
appoi	ned fiduciary by that fiduciary)	

LILIANA SAINZ DE LA TORRE

(Typed or printed name of person signing)

PRESIDENT AND INCORPORATOR

(Title of person signing)