L11000119638

(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone #	f)
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12 NOV -7 PM I2: 28
SEVAL JARY OF STATE
TAIL AHASSEE; FLORIDA

N. Culligan NOV = 8 2012

COVER LETTER

TO: Registration Sect Division of Corpo	ion prations		". .
SUBJECT: Brigh	1- Property Solution Name of Limit	tions, LLC ed Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	<u> </u>	Name of Person	
		Firm/Company	
	16047 (01	lins Avenue, Ste 1100	3
	Sunny Isle	S BLACK FL 33160 City/State and Zip Code	
	E-mail address: (to	s a mail. UM o be used for future annual report notificati	on)
For further information cor	ncerning this matter, please ca	all:	
Name of I	Domon	at () Area Code & Daytime Te	1.1. North
name of t	·	Area Code & Daytime Te	nepnone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee .	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED 12 NOV -7 PM 12: 28

į	O1		April 6 American	
Bright Property	Salutions	SILL	SECRETARY OF STATE FALLAHASSEE, FLORIDA	
(Name of the Limited L (A F	iability Compan Iorida Limited Li	y as it now appears on our ability Company)	r records.)	
`		,	,	
The Articles of Organization for this Limited Liab		were filed on $10/19$	2011 and assigned	
Florida document number 11000119638	<u>} </u>			
•				
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	<u>he limited liabi</u>	lity company here:		
The second of th				
The new name must be distinguishable and end with "L.L.C."	the words "Limite	ed Liability Company," the	designation "LLC" or the abbreviation	nc
Enter new principal offices address, if applicat	ole:	16047 Collins	Avenue, Ste 1603	
(Principal office address MUST BE A STREET	ADDRESS)	Sunny Isles B	each, FL 33160	
1 1		<u> </u>		
·			M . O	
Enter new mailing address, if applicable:		Thort Corrus	Avenue, Ste 1603	
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>	Sunny lars I	beach, FL 33160	
B. If amending the registered agent and/or			ords, enter the name of the ne	w
registered agent and/or the new registered office	ce address here	:		
Name of New Registered Agent:	Lev Khas	is		
New Registered Office Address:	16047 6	Uins Avenue, St	ida street address	
	Sunnu le			
	Surry 13	City	_, Florida <u>331 (φ 0</u> Zip Code	
New Registered Agent's Signature, if changing Re	gistered Agent:		-	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered yent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MCR	Anna Poliakova	1160 Kane Concourse, #202	Add
		Bay Harbor Islands, AL 33152	Remove
MURM	Lev Khasis	16047 Collins Avenue, #1603	Xdd
		Sunny Isles Beach, FL 33160	Remove
HGR_	Youri Coldovski	2500 Parkview Drive #1209	_ B_ X Add
		Hallandale, FL 33009	Remove
	ŧ		Add
			Remove
	:		_ Remove
	!		Add
		······································	Remove

amending any oth	er information, enter change(s) here: (Attach additional sheets, if necessary.)
·	
_	
	•
1 (-)	1
November	1 , 2012 .
	$\sim 10^{-1}$
	Signature of a member or authorized representative of a member
	Anna Holiakova
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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NATURALISSEE, FLORIDA