

LO7000099986

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

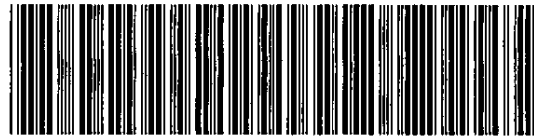
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRIGHT IDEAS & EVENTS LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CRAIG S ROBINSON, CPA
(Name of Person)

CSR-CPA
(Firm/Company)

38 S. 8TH ST.
(Address)

DE FUNIAK SPRINGS FL 32435
(City/State and Zip Code)

For further information concerning this matter, please call:

CRAIG S. ROBINSON, CPA at (850) 892-0888
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

PLEASE INCLUDE OMITTED MANAGER MEMBER:

JEFFREY A. McDOWELL TITLE: MGRM

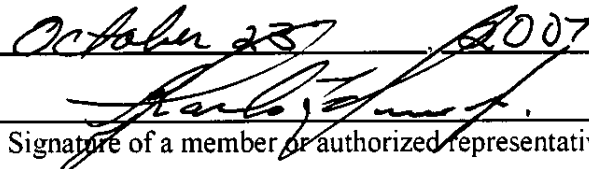
100 WINDING ROAD

DOTHAN, AL 36301

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: October 23, 2007


Signature of a member or authorized representative of a member

CHARLES W HINSON JR

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L07000099986
FILED 8:00 AM
October 02, 2007
Sec. Of State
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Article I

The name of the Limited Liability Company is:

BRIGHT IDEAS & EVENTS LLC

Article II

The street address of the principal office of the Limited Liability Company is:

481 MILLARD GAINEY ROAD
DEFUNIAK SPRINGS, FL. 32435

The mailing address of the Limited Liability Company is:

481 MILLARD GAINEY ROAD
DEFUNIAK SPRINGS, FL. 32435

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

CHARLES W HINSON JR
481 MILLARD GAINEY ROAD
DEFUNIAK SPRINGS, FL. 32435

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: CHARLES W HINSON

Article V

The name and address of managing members/managers are:

Title: MGRM
CHARLES W HINSON JR
481 MILLARD GAINES ROAD
DEFUNIAK SPRINGS, FL. 32435

Signature of member or an authorized representative of a member

Signature: CRAIG S ROBINSON

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FILED 8:00 AM
October 02, 2007
Sec. Of State
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