## L08000002813

(Requestor's Name)		
(Add	lress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
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2000 NOV -3 PH 2: 50

C. LEWIS

NOV 42008

EXAMINER

## **COVER LETTER**

TO:	Registration Sector Division of Corporation				
SUBJI	ECT:	BRIGHT AMER	ICA SERVICES, LLC		
		(Name of Lim	ited Liability Company)		
The en	iclosed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please	return all correspond	dence concerning this matter	to the following:		
		E	LIAS ZAK ZAK NETO		
			(Name of Person)		
		Z	AK INVESTMENTS, LLC		
(Firm/Company)					
		10409 A	UTUMN GLEN COURT		
			(Address)	<del></del>	
ORLA			RLANDO, FL, 32836		
			(City/State and Zip Code)		
For fu	rther information co	ncerning this matter, please c	all:		
ELIAS	S ZAK ZAK NETO		at ( 407 ) 970 3491		
(Name of Person)		Person)	(Area Code & Daytime T	elephone Number)	
Enclos	sed is a check for the	following amount:			
<b>☑</b> \$2:	5.00 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

FILED

ARTICLES OF ORGANIZATION **OF** 

2000 NOV -3 PM 2: 50

**BRIGHT AMERICA SERVICES LLC** 

SECULCIANT ATE TALLAHASSEE, FLORIDA

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited L	iability Company	were filed on 10/28/2	2008 and assigned
Florida document number L08000002813	·		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
N/A			
The new name must be distinguishable and end wis "L.L.C."	th the words "Limi	ted Liability Company,	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		8810 COMMODITY CIR. STE 17	
(Principal office address MUST BE A STREET ADDRESS)		ORLANDO, FL, 32819	
			· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		8810 COMMODITY CIR. STE 17	
(Mailing address MAY BE A POST OFFICE BOX)		ORLANDO, FL, 32819	
B. If amending the registered agent and/registered agent and/or the new registered of			records, enter the name of the nev
Name of New Registered Agent:	ELIAS ZAK ZA	AK NETO	
New Registered Office Address:	8810 COMMC	DDITYY CIR. STE 17	
		(Enter	Florida street address)
	ORLANDO		, Florida <u>32819</u>
		(City)	(Zip Code)
New Registered Agent's Signature, if changing	Registered 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 Agent, Signature of New Registered Agent)

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

MGR = Manager MGRM = Managing Member

<u>Title</u> .	<u>Name</u>	Address	Type of Action
MBR	ZAKA AFIF ZAK ZAK	8810 COMMODITY CIR. STE 17 ORLANDO, FL, 32819	Add Remove
			Add Remove
	<del></del>		Add Remove
	<del></del>		Add Remove
		-	Add Remove
<del></del>			Add Remove
D. If amend	ling any other information, enter cha	nge(s) here: (Attach additional sheets, if necessor	ary.)
* <u>TH</u> I	E ADDRESS OF MBR ZAK INVESTMI	ENTS LLC IS TO BE CHANGED TO:	
881	10 COMMODITY CIRCLE SUITE 17		<del></del>
OR	LANDO, FL, 32819		
# <u>L</u>	iST THE FEIN # BI-	1550299	TRECHIASSE
Dated Octob	er 29 , <u>200</u>	<u>8</u> .	N-3 PM 2: 50 WASSEE, FLORID
	•	per or authorized representative of a member	2: 50 LALE ORID
		IAS ZAK ZAK NETO U	<u> </u>

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Filing Fee: \$25.00