# 08000057306

(Requestor's Name)		
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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EXAMINE,

OCT 3 2013

J. SAULSBERRY

#### **COVER LETTER**

**TO:** Registration Section Division of Corporations

## **SUBJECT:** Bright Manufacturing LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

## Guil Hetzroni

Name of Person

## Bright Manufacturing LLC

Firm/Company

2933 W. Cypress Creek Rd., Suite 202

Address

Fort Lauderdale, FL 33309

City/State and Zip Code

## g.hetzroni@powerbright.com

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

For further information concerning this matter, please call:

## Abner Bezerra

<sub>at (</sub>754

229-3398

Name of Person

Area Code & Daytime Telephone Numbe

#### 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

□ \$55 Filing Fee & Certified Copy

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. Name of the limited liability company: Bright Manufacturing LLC 2. (a) Principal office address of limited liability company: 2933 W. Cypress Creek Rd Suite 202 (Note: MUST BE STREET ADDRESS) Fort Lauderdale FL 33309 (b) Mailing address of limited liability company: 2933 W. Cypress Creek Rd (Note: MAY BE POST OFFICE BOX) Suite 202 Fort Lauderdale FL 33309 06/10/2008 L08000057306 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Guil Hetzroni Registered Office Address: 2825 North University Dr. Suite. 210 Coral Springs, FL 33065 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: Guil Hetzroni **NEW** Registered Agent: 2933 W. Cypress Creek Rd **NEW** Registered Office Address: Suite 202 (MUST BE FLORIDA STREET ADDRESS) Fort Lauderdale FL 33309 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member

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.

Signature of Registered Agent