L0900000 3048

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (Addless) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Business Lilai, Hume) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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T. CLINE
MAY 1 2 2009
EXAMINER

COVER LETTER

| | | rporations | // /- | | | |
|-------------------|-------------|--|---|---|--|----|
| SUBJECT: | | Bright Mind Me Name of Limi | ted Liability Company | | | |
| | | , | | | | |
| The enclosed | Articles of | f Amendment and fee(s) are sub | omitted for filing. | | | |
| Please return | all corresp | ondence concerning this matter | to the following: | | | |
| | | Seth. | Weiler | | | |
| | | • | Name of Person | | | |
| | | Brig | It Mid Morks L | 120 | | |
| | | | Firm/Company | | | |
| | | 4747 | 7 Hollywood Blv. | d #301 | / | |
| | | H | ollywood, FI 33 | 02/ | | |
| | | | City/State and Zip Code | | ISI 251 | |
| | | E-mail address: (t | to be used for future annual report notifica | tion) | CRECKE | 71 |
| For further in | formation | concerning this matter, please c | all: | | 2009 MAY 11 SECRETAR TALLAHASS | |
| | <i>/</i> | H / / | | · ~ . | 333 0 43 1 b | T |
| |)U/ Name | h Weiler of Person | at (<u>954) 374 - 19</u> Area Code & Daytime T | 7/ elephone Number | S. 22. | |
| | Name | or reason | , non cour a suy anno . | | PM 12: 50 Y OF STATE EE. FLORIDA | |
| Enclosed is a | check for | the following amount: | | | | |
| \$25.00 Fi | ling Fee | \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Certificate Certified C (additional | of Status & | |

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 OF

| Bright | Mind h | Joks L | 20 | | |
|---|---|-------------------------------------|---------------------|----------------------|----------|
| (Name of the Amited (A | Liability Company of Florida Limited Liab | is it now appears of ility Company) | n our records.) | | |
| The Articles of Organization for this Limited Li Florida document number <u>LO 90000</u> | ability Company we | re filed on | 1/12/09 | and assign | ed |
| This amendment is submitted to amend the follow | owing: | | | | |
| A. If amending name, enter the new name of | the limited liabilit | y company here: | | | |
| The new name must be distinguishable and end wit "L.L.C." | h the words "Limited | Liability Company, | " the designation " | LLC" or the abbi | eviation |
| Enter new principal offices address, if application | able: | | | | |
| (Principal office address MUST BE A STREE | T ADDRESS) | | | 7 | <u></u> |
| | - | | | DOS HAY | -11 |
| Enter new mailing address, if applicable: | _ | | | AR I | |
| (Mailing address MAY BE A POST OFFICE) | <u>BOX)</u> | | | . 유 | m |
| | _ | | | <u> </u> | |
| B. If amending the registered agent and/or the new registered of | | address on our | records, enter | the name of t | he new |
| Name of New Registered Agent: | Seth | Weiler | | · | |
| New Registered Office Address: | 4747 | Hollywa Enter | Florida street add | <u>d#30</u> dress | |
| | Hollyu | pod | , Florida | 33021 | |
| | / (| Zity | | 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 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 | | | | | | | |
|------------------------|---------------------------------------|---|----------------|--|--|--|--|
| Title | <u>Name</u> | Address | Type of Action | | | | |
| M GRM | Seth Weiler | 4747 Hollywood Blvd,#9. Hollywood FL 33021 | Add Remove | | | | |
| <u>MGR</u> | Lewis Nigd | 600 N Pinelsland Rd #4) | Add Remove | | | | |
| | | | Add Remove | | | | |
| | | TALL AHA | Add Remove | | | | |
| | | SSEE. FLO | Hemove | | | | |
| | | RIDA | Add Remove | | | | |
| D. If amendin | g any other information, enter change | (s) here: (Attach additional sheets, if necessary.) | _ | | | | |
| | | | _ | | | | |
| | | | _ | | | | |
| Dated | Signature of a member of | or authorized representative of a member | | | | | |
| _ | 5 | Muler or printed name of signee | | | | | |

Page 2 of 2

Filing Fee: \$25.00