# L130000 19027

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## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT:	Bright Idea Name of Limit	LLC	
•	Name of Limit	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	idence concerning this matter	to the following:	
	Aaron	D. Moore	
		Name of Person	
	Bright	D. Moore Name of Person  I dea LLC Firm/Company	<u> </u>
		Firm/Company	
	4620 NO	N 85th Ave.	
		Address	
	Lauderh	ill /FL 33351	
	putus 61	ill / FL 33351 City/State and Zip Code 078@gmail.com	
	E-mail address: (t	o be used for future annual report notificati	on)
For further information co	oncerning this matter, please ca	all:	
A aron D	. Moore	at (954) 615 —  Area Code & Daytime Te	7054
Name of	Person	Area Code & Daytime Te	lephone Number
Enclosed is a check for th	e 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 OF

Bright Idea	LLC							
(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 Liability Co. Florida document number <u>L 13000019027</u>	ompany were filed on $\frac{2/6/2013}{}$ and assigned							
This amendment is submitted to amend the following:								
A. If amending name, enter the new name of the limit  Brighter Ideaz LLC  The new name must be distinguishable and end with the work								
"L.L.C."								
Enter new principal offices address, if applicable:	4614 N. University Dr. ESSI Lauderhill, FL 33351							
(Principal office address MUST BE A STREET ADDR.	ESSI Lauderhill, FL 33351							
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	4620 NW 85th Ave. Landerhill, FL 33351							
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:								
Name of New Registered Agent:	75 Hart							
New Registered Office Address:	4614 N. University Dr. 5 77  Enter Florida street address &							
<u></u>	ruderhill Florida 33359 Zip Coile							
New Registered Agent's Signature, if changing Registered	l 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 **Type of Action Title Address** Name Remove Remove Remove

D.	If am	ending Any	other	information, e	nter c	:hange(s) here:	(Attach ad	ditional sheets,	if necessary.)	
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Dat	ed	Mar	ch	5+h		2013.				-
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		<del></del>	<del></del>	Signature of	of a m	ember or authoriz	zed represent	ative of a memb	ег	
			,	Aaron	D.	Moore	?			
					7	Typed or printed i	name of sign	ce		

Page 3 of 3

Filing Fee: \$25.00