

L 13000140785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
FEB 17 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GREEN BULB SOLUTION, LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

JOSE RODRIGUEZ
Name of Person

L13000140785
Firm/Company

4849 S. CLASSICAL BLVD
Address

DELRAY BEACH, FL. 33446
City/State and Zip Code

greenbulbsolution@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHRISTIAN SANTA at (561) 385-3437
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GREEN BULB SOLUTION, 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 Company were filed on 10/7/13 and assigned
Florida document number L13000240785

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:

Name of New Registered Agent:

JOSE RODRIGUEZ

New Registered Office Address:

4849 S. CLASSICAL BLVD

Enter Florida street address

DELRAY BEACH

City

Florida

33445

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 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 605, F.S. Or, if this document 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 New Registered Agent

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

MGR = Manager


AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------|------------------|--|
| MGR | CHRISTIAN SANTA | 428 ANCHORAGE LN | <input type="checkbox"/> Add |
| MRGM C.J. | | NORTH PALM BEACH | <input checked="" type="checkbox"/> Remove |
| | | FL 33408 | |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 02/04/ 2014.



Signature of a member or authorized representative of a member
Jose Rodriguez

Typed or printed name of signer

February 4, 2014

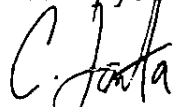
Florida Department of State
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern,

This letter is to inform the Florida Department of State that I will not be involved with Green Bulb Solution, LLC and sold my ownership to Jose Rodriguez. My interest led me to a better opportunity elsewhere and will like to transfer ownership to Jose Rodriguez. Jose Rodriguez will take full interest and responsibilities as of Amendment effective date of issue and I will have no legal matter in future business matters.

Jose Rodriguez has paid me my share of \$400 as of today, February 4, 2014, for full ownership.

Sincerely yours,



Christian Santa-Gonzalez

Jose Rodriguez
4849 S. Classical Blvd
Delray Beach, FL, 33445
February 12, 2014

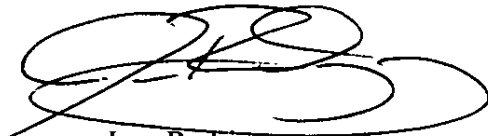
Florida Department of State
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern:

This letter is to acknowledge that I Jose Rodriguez have bought all rights and obligations to Green Bulb Solution, LLC and have become the sole owner and proprietor of said business.

I Jose Rodriguez have paid Christian Santa the sum of \$400 on the date of February 4, 2014 for full ownership of Green Bulb Solution, LLC.

Sincerely,



Jose Rodriguez