LIBOONYSS

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
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01/04/18--01018--020 **25.00

711 JAN -4 P 2: 42

COVER LETTER

	Registration Section Division of Corporations				
SUBJEC	Bright Finish Pressure Washin	g Services	LLC		
		of Limited Lia	ability Company		
Dear Sir	or Madam:				
The encl	osed Registered Agent/Registered Office	Change and	fee(s) are submitted for filing		
Please re	eturn all correspondence concerning this n	natter to the f	following:		
Ernest	o Lopez				
	Name of Person		_		
	Firm/Company		_	2018 121	∸ 79
18495	South Dixie Highway, Ste. 400			2018 JAN - U LATTARSE	FILE
	Address		_	1388 11-11	m
Miami,	FL 33157			IN JAN -4 P 2: 42	O
	City/State and Zip Code			5	
abright	tfinish@gmail.com				
E-t	nail address: (to be used for future annua	report notifi	cation)		
For furth	ner information concerning this matter, ple	ease call:			
Ernest	o Lopez	305 at (608-8044		
	Name of Person		Area Code & Daytime Tele	phone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.O	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, Florida 32314		
	Enclosed is a check for the following ar	nount:			
	☑ \$25 Filing Fee	\(\sigma\) \$5	5 Filing Fee & Certified Cop	у	

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

١.	Na	me of the limited liability company: Bright Finish F	Pressur	e Washing	g Services LLC
2.	(a)		(b)		
	` /	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		M	lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		18495 South Dixie Highway, #400		18495 Sc	outh Dixie Highway, #400
		Miami, FL 33157	_	Miami, F	L 33157
		10/11/13		L1300014	3651
3.		Date of filing/registration in Florida	4.		Document number
5	(a)	Ernesto Lopez			
J.	(44)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			DU C
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					7.5
	13611 South Dixie Highway, #546				SSS - M
		Miami , FL	33176		
	41.5				2: 42
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:					
		NEW Registered Office Address:			
		18495 South Dixie Highway, #400			
		Miami FI.	33157		
the ag wa the	e cha ent v is/we arti signa iere. ovisi ovisi mer	imited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cless of organization or the operating agreement of the law of a member or authorized representative of a member of the law of a member of a member of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. In	the regis ability co f the lim limited I Ern	tered office mpany, it is ited liability iability com esto Lope	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. Z Printed or typed name of signee acity. I further garee to comply with the
Si	gnare	re of Registered Agent			

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00