## L16000102354

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## COVER LETTER

TO:		istration Se ision of Cor		<b>₽</b> 3	e <b>e e</b> e e e e e e e e e e e e e e e e	* *
SUBJEC	CT.	BRIGHTN	ESS COMMUNICATION, L	LC		
SUBJEC	C1;		Name of Li	mited Liability Company		<del> </del>
The encl	losed	Articles of	Amendment and fee(s) are su	bmitted for filing.		
Please re	eturn	all correspo	ondence concerning this matte	er to the following:		
			YODIOSMAY GONZAI	LEZ		
				Name of Person		
			ALL IN ONE ACCOUN	TING SERVICE, INC		
				Firm/Company		
			4951 WEST 6TH AVE			
				Address		
			HIALEAH, FL 33012			<sub>1/2</sub>
				City/State and Zip Code		
			ZQCONSULTANTS@YA	AHOO.COM  (to be used for future annual		SP SP FI
For furth	ner in	nformation c	oncerning this matter, please		report notification)	SSEE OF LET
YODIO	SMA	Y GONZA	LEZ	305 92	26-2190	
	•	Name o	f Person	Area Code	Daytime Telephor	ne Number
Enclosed	d is a	check for the	ne following amount:			
\$25.	.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is en		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Registr Division P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	Registra Division Clifton I 2661 Ex	T/COURIER ADD tion Section of Corporations Building secutive Center Circl see, FL 32301	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRIGHTNESS COMMUNICATION, LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records ted Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability Compa	any were filed on 05/20/2016	and assigned
Florida document number L16000102354		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability 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	)	
		17 SE 16
Enter new mailing address, if applicable:		SI SI
Mailing address MAY BE A POST OFFICE BOX)		
-		Sign of the
		☆湯 ■ ∪
B. If amending the registered agent and/or registered		, enter the name of the
egistered agent and/or the new registered office address l	here:	3m 8
Name of New Registered Agent:		· •
New Registered Office Address:		
	Enter Florida street address	T .
	· · · · · · · · · · · · · · · · · · ·	orida
	City	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 605, 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 Changing Registered Agent. Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MIAMICELL WIRELESS CORP	12685 NW 9TH TERR	<b>■</b> Add
		MIAMI, FLORIDA 33182	□ Remove
			□ Change
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Effective f an effe Note: I	re date, if other than the date of filing: ctive date is listed, the date must be specific and cannot be f the date inserted in this block does not meet the	be prior to date of fi	ling or more than 90 days	optional) after filing.) Pursuant to 605.020
	nt's effective date on the Department of State's re		,	,
	ord specifies a delayed effective date, b 90th day after the record is filed.	ut not an effe	ctive time, at 12:0	01 a.m. on the earlier o
Dated S	SEPTEMBER 1 2016			
_	Viselly	Portera	>\ <u>\</u>	
	Signature of a member	or authorized repre	sentative of a member	
	·			

Page 3 of 3

Filing Fee: \$25.00