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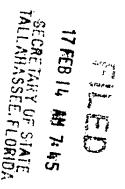
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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Bright VOICE LLC Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
EVA BUTTON Name of Person					
Bright Voice Finacials LLC Firm/Company					
7994 Riviera Blvd.					
Address					
miramar, Fl 33023					
City/State and Zip Code					
Geeni21290 @yahoo.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
EVA Burton at (786) 873 - 3407 Name of Person Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Registration Section					
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327					
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301					

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

Enclosed is a check for the following amount:

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.

1. Na	ame of the limited liability company: SYIANT VOICE FINACIA	<u> </u>		<u>-</u>
2. (a)	7994 Riviera Blud miramar, FI (b) 4970 NW 182	nd	St	Mian
()	Principal office address of limited liability company: 3323 Mailing address of limited (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST			
	(Note: MUST BE STREET ADDRESS)	OFFIC	L DUA	, .
				
	12/30/16 117000008	(2	4	
3.	Date of filing/registration in Florida 4. Document number	<u>, —</u>		
5. (a)	Tracy Ashley JR.			
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	7994 RIVIETA BIVA.	et ≯on		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	- 전	17 5	
		[유] > 및	8	ALTERNATION
	WIII COLL 50072	25 7	=	€ 1
(b)	EVA BUTTON	ر ان کا		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:	HALE TIMES	\$ 1.T	No. and
		5 FT	C)1	
	NEW Registered Office Address:			
	7994 Riviera Blvd.			
	ma (a ma a a a a a a a a a a a a a a a a			
	MITHORIAC ,FL 35023			
If the l	limited liability company is not organized under the laws of the State of Florida, it is hereby con ange or changes are made, the Florida street address of the registered office and the business off	firmed	that a	ifter vistered
agent v	will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed the earth authorized by an affirmative vote of the members of the limited liability company or as other	at the	chang	e(s)
the art	cicles of organization or the operating agreement of the limited liability company.		Jiovia	ea iii
	ature of a member or authorized representative of a member EVA DUT + C Printed or typed name of	1 N		
_			nplv n	ith the
provis the ob	by accept the appointment as registered agent and agree to act in this capacity. I further agree ions of all statutes relative to the proper and complete performance of my duties, and I am famil ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this doct ely reflect a change in the registered office address, I hereby confirm that the limited liability co	liar wi ıment	th and is bein	accept g filed
to mer notifie	ely reflect a change in the registered office address, I hereby confirm that the limited liability co ed in writing of this change.	əmpan _.	y nas i	peen

Signature of Registered Agent