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## **COVER LETTER**

	gistration Sec vision of Corp					
SUBJECT:		BRIGHT CLEANING, LLC	•			
зованет.		Name of Limi	ted Liability Company			
The enclose	d Articles of /	Amendment and fee(s) are sub	nitted for tiling.			
Please retur	n all correspor	idence concerning this matter	to the following:			
		JAIME SOTO DIAZ				
			Name of Person			
		GB PAINTING AND REM	MODELING, LLC			
			Firm/Company			
	6200 Raleigh Street, Apartment 426					
			Address			
		Orlando, FL 32835				
		<del></del>	City/State and Zip Code			
	gbpaintandremodel@gmail.com					
		E-mail address: (1	o be used for future annual report noti	fication)		
For further i	information co	oncerning this matter, please ca	all:			
JAIME SO	TO DIAZ		407 8640781			
	Name of	Person	Area Code Daytim	e Telephone Number		
Enclosed is	a check for th	e following amount:				
\$25.00	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 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 Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

GREEN & BRIGHT CLEANING, LLC

The Articles of Organization for this Limited L	iability Company were filed	on 04/10/2017
Florida document number <u>L17000080530</u>		5 27
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name of	of the limited liability compa	any here:
GB PAINTING AND REMODELING, LLC		• •
The new name must be distinguishable and contain the	words "Limited Liability Company	"the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applie	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	
agent and/or the new registered office addre	***	our records, enter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	6200 Raleigh Street, Aparts	
	En	iter Florida street address
	Orlando	, Florida 32835
	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 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>	Name	Address	Type of Action
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			□Remove
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