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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Pight Solutions 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:
Alexandro David Santos Ir.
Firm/Company
4045 Claremont Dr.
New Port Richel FL 34652 City/State and Zip Code
Ayespook 69 6 gmail. (om E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alexandro Santos Jr. at (727) 515-3795 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S25.00 Filing Fee S25.00 Filing Fee S255.00 Filing Fee Fee S255.00 Filing Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on ________ and assigned Florida document number <u>L</u>17000087178 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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, enterthe name of the new registered agent and/or the new registered office address here: Hexandro Name of New Registered Agent: New Registered Office Address: Port Richey Florida 34652

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.

II Charles 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> **Name** Address Type of Action Jose Gonzalez 5310 Moog Rd DAdd Holiday FL 34690 Fremove 4045 Claremont Dr. Change Alexandro Santos Jr. New Port Richay FL 34652 5310 Moog Rd Holiday FC 34690 - Change MGE. Adolfo Perez □ Add ☐ Remove ☐ Change MGR. Hevin Wilbur 27 Pitt St Bryshton NY 12916 - Remove ☐ Change ☐ Add □ Remove □ Change □ Add ☐ Remove ☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets	
hemoving Jose Gonzalez title	
Adoko perez title WGR and	1
Alexandro Santos Jr. with titl	e Ap and
Yevin Wibur with title MGR.	
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	F.F.S. 72
	RE
	A
E. Effective date, if other than the date of filing:	(optional) days after filing.) Pursuant to 605.0207 (3) ents, this date will not be listed as the
If the record specifies a delayed effective date, but not an effective time, at 1 (b) The 90th day after the record is filled.	2:01 a.m. on the earlier of:
Dated August 6th . 2017.	
Dated August 6th 2017. Alexandro Surrol Typed or printed name of signee	er
Alexandro Samos J T Typed or printed name of signee	

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Filing Fee: \$25.00