



COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **Brightology Lighting, 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:

**PAULA SALGAR**

\_\_\_\_\_  
Name of Person

**BRIGHTOLOGY LIGHTING, LLC**

\_\_\_\_\_  
Firm/Company

**2637 EAST ATLANTIC BLVD #1053**

\_\_\_\_\_  
Address

**POMPANO BEACH, FL, 33062**

\_\_\_\_\_  
City/State and Zip Code

**PAULA@BRIGHTOLOGYLIGHTING.COM**

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**PAULA SALGAR**

\_\_\_\_\_ at ( **954** )

**6518555**

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH 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. Name of the limited liability company: BRIGHTOLOGY LIGHTING, LLC

2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 2637 EAST ATLANTIC BLVD #1053 POMPANO BEACH, FL, 33062 (b) Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX) 2637 EAST ATLANTIC BLVD # 1053 POMPANO BEACH, FL, 33062

3. Date of filing/registration in Florida 11/09/2017 4. Document number L17000232274

5. (a) PAULA SALGAR Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1620 SOUTH OCEAN BLVD, APT 12J POMPANO BEACH, FL, 33062

(b) PAULA SALGAR Enter name of NEW Registered Agent and/or NEW Registered Office address: 2381 NE 14TH STREET CAUSEWAY NEW Registered Office Address: APT 205 POMPANO BEACH, FL, 33062

FILED 19 JUN 27 AM 8:23 SECRETARY OF STATE TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member PAULA SALGAR Printed or typed name of signee

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 understand 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.

Signature of Registered Agent