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COVER LETTER

TO:		istration Sec sion of Corp				
eun re			TERNATIONAL REALTY L	LC		
SOBJE	CI:			ited Liability Company		_
The enc	losed	Articles of A	amendment and fee(s) are sub	mitted for filing.		
Please re	eturn	all correspon	dence concerning this matter	to the following:		
			Christopher E. Bright			
			BRIGHT INTERNATION	Name of Person AL REALTY LLC		
			1224 Catherine St.	Firm/Company		
			Orlando, FL 32801	Address		
			ChrisBrightRealtor@gmail.	City/State and Zip Code com		
			E-mail address: (to be used for future annual rep	ort notification)	_
For furth	her in	formation co	ncerning this matter, please ca	all:		
Chris B	right			407 615-9 at ()		
		Name of	Person	Area Code	Daytime Telephone Nun	iber
Enclosed	d is a	check for the	following amount:			
\$25.	.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certif ed) Certif	Filing Fee, Teate of Status & Ted Copy Onal copy is enclosed)

MAILING ADDRESS:

TO:

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

BRIGHT INTERNATIONAL REALTY LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/22/2018 and assigned Florida document number L18000127947 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Best Orlando Property Management LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 1224 Catherine St. Orlando, FL 32801 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 1224 Catherine St. Orlando, FL 32801 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, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _. Florida ___

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.

City

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 □ Remove ☐ Change □ Add ☐ Remove ☐ Change ______ D Add

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If an effective dat Note: If the dat	e is listed, the date me te inserted in this b ective date on the f	ist be specific and lock does not m	cannot be prior to eet the applica	o date of filing or ble statutory fili	more than 90 days	optional) after filing.) Pursus s, this date will no	ant to 605.0207 (of be listed as t
ne record sp The 90th c	ecifies a delaye ay after the red	d effective da cord is filed.	ate, but not	an effective	time, at 12:	01 a.m. on th	e earlier of:
Dated							
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Typed or printed name of signee

Filing Fee: \$25.00