1800)54/66

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300317002113

08/16/18--01019--014 **25.00

18 AUG 16 AM 11: 13

N COOPER AUG 2 1 2018

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Bright Shine Mobile Detailing & Lown Service UC 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:
Adrian A: Howard Name of Person Bright Shine Mabike Delaing & Lawn Service LLC Firm/Company
1709 E. Louisan - Aug Address
Tanpa, Fl 33610 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call;
Adrian D Howard at (813) 403 - 3828 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee.\$ Certificate of Status \$\Bigcup \$\text{Certified Copy} \\ (\text{additional copy is enclosed}) \\ Certified Copy \\ (\text{additional copy is enclosed}) \\ \Bigcup \$60.00 Filing Fee. \\ Certified Copy \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy is enclosed}) \\ \Bigcup \$\text{certified Copy} \\ (\text{additional copy} \)

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

y As it now appears on our records.) apolity Company)
were filed onand assigned
lity company here:
ty Company," the designation "LLC" or the abbreviation "L.L.C."
SECRETARY OF STARY OF CORPORA
ice address on our records, enter the names of the new
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.

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 = Au	nthorized Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
mer	Willie Brooks	4906 S. 82nd St Tampa, F1 33619	
			□ Remove
			☐ Change
			Add
			□ Remove
			Remove
			□ Change
			□ Remove
			Change
			Add
			Remove
		<u> </u>	Change
			Add
			□ Remove
			□ Change

				<u></u>				
					· · · · · · · · · · · · · · · · · · ·			_
		•						
								
								
					<u>-</u> .			
				-,		* 1	·	
·							IB AUG	SEC: VISID
							ଅ 	후호 독무
								CORP
			-				1:1:	ORAI
	•						చ	:NO.
			-				•	
Note: If the da	, if other than the date is listed, the date must be the inserted in this block ective date on the Depar	does not m	eet the applic	able statutory			ng.) Pursuant to	
	ecifies a delayed efi lay after the record		ate, but no	t an effecti	ve time, a	: 12:01 a.n	n. on the ea	rlier o
Dated A	gust 8th	· ·	2013	<u>8</u> .				
<u>\</u>) Adrian	A L	mond	,				_
	Sign	nature of a ir	tember or autho	orized represent	ative of a men	iber		

Page 3 of 3

Filing Fee: \$25.00