## L19000002568

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	<del></del>
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	е)
(Do	cument Number)	
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## **COVER LETTER**

TO: Registration S Division of Co			
	TER SPARKLE LLC		*
SUBJECT:	Name of Lim	ited Liability Company	
	f Amendment and fee(s) are sub ondence concerning this matter		
	JESSICA JOHNSON		
		Name of Person	<u> </u>
	A BRIGHTER SPARKLE	LLC	
		Firm/Company	
	909 N WALTON AVE		
		Address	
	TARPON SPRINGS, FL 3	34689	
		City/State and Zip Code	
	jjohnson@titlese.com		•
		to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all:	
JESSICA JOHNSON		813 471-7952 at ( )	
Name	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre	ess:	Street Address:	

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

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

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

A BRIGHTER SPARKLE LLC			
(Name of the Limi	ted Liability Company as it now app (A Florida Limited Liability Compan	ears on our records.) v)	<u>_</u>
The Articles of Organization for this Limited L	iability Company were filed on	12/31/2018	and assigned
Florida document number L19000002568	<del></del> .		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liability company	here:	
The new name must be distinguishable and contain the v	words "Limited Liability Company," th	e designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applic	eable:	TA	
Principal office address MUST BE A STREET ADDRESS)			
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		ტე ტ ნე 1	- 📆
inter new mailing address, if applicable:			. 휴 🗘 _
Mailing address MAY BE A POST OFFICE	BOX)		6
. If amending the registered agent and/or ( gent and/or the new registered office addre		r records, enter the nam	ie of the new registe
gent and/or the new registered office addre	ss uere.		
Name of New Registered Agent:	Universal Legal	Support, Inc.	
New Registered Office Address:	3970 Tampa Road,	Ste. E	
<u> </u>	Enter l	Florida street address	
	Oldsmar	, Florida	34677
	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 Changing Registered Agent, Signature of New Registered Agent By: Melvin Johnson, VP

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
VP	JOHN M. PEDERSEN JR.	909 N WALTON AVE	
		TARPON SPRINGS, FL 34689	Remove
			□Change
			Remove
			□Change
			□Remove
			Change
			□Add
		<del></del>	Remove
			□Change
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ective date, if oth	er than the date of filing:	.1	optional)
n effective date is liste te: If the date inser	I, the date must be specific and cannot be pricted in this block does not meet the appliate on the Department of State's record	or to date of filing or more than 90 days icable statutory filing requirement	after filing.) Pursuant to 605.0207
cord specifies a del s filed.	ayed effective date, but not an effective	time, at 12:01 a.m. on the earlier	of: (b) The 90th day after the
JUNE 25	\( \triangle \tr		
	Casia Maliso		

Typed or printed name of signee