

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPAT CONSULTING CORP.

Account Number : I20190000096 Phone : (407)745-1112 : (407)641-8083 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: ACC@EXPATCONSULTING.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BRIGHT & SHINY CLEANING SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

TO:

Page: 5 of 8

Registration Section

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

COVER LETTER

Division of Cor	porations - A	TES LLC	•
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	NILTON FREGNI		
		Name of Person	
	EXPAT CONSULTING C	ORP	
		Firm/Company	
	8615 COMMODITY CIR.	ST.11	
		Address	
	ORLANDO - FL - 32819		
		City/State and Zip Code	
	ACC@EXPATCONSULTE		
	E-mail address: (to be used for future annual report not	rification)
For further information c	oncerning this matter, please o	all:	
NILTON FREGNI		407 745.1112	
Name o	f Person	at () Area Code ——Daytii	ne Telephone Number
Enclosed is a check for the	ne following amount:		
S25.00 Filing Fee	☐ \$30.00 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)
MailingAddres Registration S		<u>StreetAddress:</u> Registration Sc	
Division of C P.O. Box 632	•	Division of Co The Centre of	•

From: EXPAT CONSULTIA

Page: 6 of 8

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRIGHT & SHINY CLEANING SERVICES LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) ambility Company)	 	
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000074116</u> .	were filed on 03/05/2020	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabit	lity Company," the designation "LLC" or the al	bbreviation "L.L.C."	•
Enter new principal offices address, if applicable:	6201 VINELAND RESORT WAY - AI	PT.220	_
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO - FL - 32821		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6201 VINELAND RESORT WAY - AI ORLANDO - FL - 32821	PT.220	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the nan</u>	ne of the new registe	<u>red</u>
Name of New Registered Agent:		72.	-
New Registered Office Address:			3
	Enter Florida street address	7	ر کرید
	, Florida	Zip Code	ງ <u>></u>
		Zip Code	<u></u>
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agr	ee to act in this capacity. I further as	gree to comply with t	the

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.

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2022-05-17 16:10:11 GMT

14076418083

From: EXPAT CONSULTIN

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
AMBR	OLIVEIRA, LAIS DAMACENO		🗆 Add
			≣Remove
			□Change
MGR GOMES DA CRUZ, SARITHA	6201 VINELAND RESORT WAY, APT.220	□Add	
		ORLANDO - FL - 32821	□Remove
		<u> </u>	Change
			□Add
			□Remove
			Change
			🗆 Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
		🗆 Add	
			Remove
			□Change

D.

. E.

From: EXPAT CONSULTIN

if an ef <u>Note:</u>	tive date, if other than the date of filing:
The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed.
Dated	1 Octando MAY, 17, 2022
	X Anisha W. Aug 17. 2022 X Anisha W. Aug Signatury of a measther or authorized representative of a member SAR 1 Tha G. Jan CRU3 Typed or printed names of signed
	SARITHA 6 da CRUZ

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