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COVER LETTER

Division of Corporations
SUBJECT: Bright City Lights Logistics LLC Name of Limited Limbility Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Torrence E McG.LL Name of Person
Firm/Company
257 SW 1St Court
Deer Cield Beach Florida, 33441 City/State and Zip Code BULLOUISTICS. Contact Coma. 1. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TOCCENCE E MCGILL at (954) 531 - 5002 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

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

Street Address:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	City	, Florida Zin Code
	Enter Florida :	street address
New Registered Office Address:		
Name of New Registered Agent:		
B. If amending the registered agent and/or register agent and/or the new registered office address here		rds, enter the name of the new registered
(Mailing address MAY BE A POST OFFICE BOX)		2
Enter new mailing address, if applicable:		<u> </u>
		= =
(Principal office address MUST BE A STREET ADD	<u> </u>	T
Enter new principal offices address, if applicable:		702
The new name must be distinguishable and contain the words "Li	mited Liability Company," the design	nation "LLC" or the abbreviation "LLC."
A. If amending name, enter the new name of the lin	mited liability company here:	
This amendment is submitted to amend the following:		
Florida document number 9003541124	<u>4</u> 4	
The Articles of Organization for this Limited Liability	_	

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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Torrence E McGiL	1_251 SW 13+ Court	∑ Add
		Deerfield Beach FL	/— □Remove
		33441	□Change
AMBR	Makita R Calhan	511 SE 13Th Drive	□Add
		Deerfield Beach FL	<u>-</u>
		33441	Change
			□Add
			□ Remove
			□Change
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f an effective date Note: If the date	if other than the dat is listed, the date must be se inserted in this block of etive date on the Depart	specific and cannot be does not meet the	applicable statut	iling or more than 90 ory filing require	(optional) days after filing, nents, this date	Pursuant to 605.020 will not be listed a
e record specifies ed is filed.	a delayed effective dat	e, but not an effec	tive time, at 12:	01 a.m. on the ear	lier of: (b) The	e 90th day after the
	-010-20		·			
7	Ne Chata &	ature of a member of	O:W- or authorized repre	sentative of a memb	рет	

Filing Fee: \$25.00