L20000373041

	questor's Name)	
97)	questors Name)	
(Aa	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

	Registration Section Division of Corporations					
SUBJEC	BRITE STAR HOLDINGS, LLC					
SOBJE		Name of Limited Liability Company				
Dear Sir	or Madam:					
The encl	osed Registered Agent/Registered C	Office Change a	nd fee(s) are submitted for filing.			
Please re	eturn all correspondence concerning	this matter to th	ne following:			
Lindsey	Buis					
	Name of Person					
SPI Corp	orate Solutions, Inc.					
	Firm/Company					
524 S. 2r	nd Street, Ste. 505					
	Address					
Springfie	eld, IL 62701					
	City/State and Zip Code	:				
info@ur	agents.com					
E-	mail address: (to be used for future a	innual report no	tification)			
For furth	ner information concerning this matt	er, please call:				
Lindsey	Buis	217 at (501-4283			
	Name of Person		Area Code & Daytime Telephone Number			
	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			
	Enclosed is a check for the followi	ng amount:				
	■ \$25 Filing Fee	۵	\$55 Filing Fee & Certified Copy			

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

(a) .	3210 Wyndmere Drive, Dallas, TX 75082	(t	55 West Mon	roe Street, Ste. 3600 Chi	cago, IL 60603		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mail	ing address of limited liabi			
	12/07/2020		L20000373041				
(a)	Date of filing/registration in Florida STEPHEN R. MOORHEAD	4.	Do	eument number			
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 127 PALAFOX PLACE, SUITE 200 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	DEN'S A COL A	32502 L_	- /	- :	7,000,000,15		
b)	Universal Registered Agents, Inc. Enter name of NEW Registered Agent and/or NEW Registered	ed Office ad	dress:				
	1317 California Street NEW Registered Office Address:	o office at	<u></u>		<u>:</u> ت		
	Tallahassee / / . F	. 32304	<u>/</u>				
nge nt r :/y/e	ignited hability company is not organized under the later charges are made, the Florida street address of the vill be identical. On in the case of a Horida limited later futhorized by an aftirmative vote of the memoers cles of organization or the operating agreement of the	e register iability co of the lime limited	ed office and the ompany, it is he lited liability of iability compa	ne business office of the ereby confirmed that the ompany or as otherwis	ie registered ne change(s)		
i nai	thre of a member or authorized representative of a member	Anl —	nur Hood Pr	inted or typed name of sign	lee		
erel	by accept the appointment as registered agent and as ons of all statutes relative to the proper and complet igations of my position as registered agent as provide by reflect a change in the registered office address. I	e pertorm	in this capacit	rv. I further agree to clies, and I am familiar	omply with th		

Signature of Registered Agent