

L21600052049

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

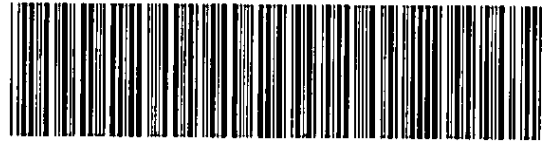
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2021 MAY 27 P 3:41

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 17, 2021

BROWN ANTHONY III  
834 N.W. 82 AVENUE  
PLANTATION, FL 33324

SUBJECT: BRIGHT STAR MOBILE DETAIL, PRESSURE WASH & PAINTING,  
LLC\*\*\*\*\*  
Ref. Number: L21000052049

We have received your document for BRIGHT STAR MOBILE DETAIL,  
PRESSURE WASH & PAINTING, LLC\*\*\*\*\* and your check(s) totaling \$30.00.  
However, the enclosed document has not been filed and is being returned for the  
following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by  
one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or  
your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call  
(850) 245-6050.

Summer Chatham  
OPS

Letter Number: 821A00010292

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Bright Star Mobile Detail, Pressure Wash & Painting, LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ and assigned  
Florida document number \_\_\_\_\_.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: \_\_\_\_\_

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_  
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. On \_\_\_\_\_, 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

MAY 27 2013 4:11 PM

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>      | <u>Address</u>                   | <u>Type of Action</u>                         |
|--------------|------------------|----------------------------------|-----------------------------------------------|
| MGR          | Brown Anthony II | 834 W. W. 82 Ave Plantation Fla. | <input checked="" type="checkbox"/> Add 33324 |
|              |                  |                                  | <input type="checkbox"/> Remove               |
|              |                  |                                  | <input type="checkbox"/> Change               |
| MGR          | Jaeden T. Hicks  | 834 W. W. 82 Ave Plantation Fla. | <input checked="" type="checkbox"/> Add 33324 |
|              |                  |                                  | <input checked="" type="checkbox"/> Remove    |
|              |                  |                                  | <input type="checkbox"/> Change               |
|              |                  |                                  | <input type="checkbox"/> Add                  |
|              |                  |                                  | <input type="checkbox"/> Remove               |
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|              |                  |                                  | <input type="checkbox"/> Remove               |
|              |                  |                                  | <input type="checkbox"/> Change               |

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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 03.10.21

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Brown Anthony  
Typed or printed name of sign

Typed or printed name of signee

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