Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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BRIGHT WELLNESS RESEARCH LLC

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Electronic Filing Menu Corporate Filing Menu

Help

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DUICUE WELL MESS DESCAROULLO

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited Liability Compa | inv as it now suppars an our records) | | | |
|---|--|----------------|------------|--------------|
| (Name of the Limited Liability Compa (A Fiorida Limited I | Liability Company) | | | |
| The Articles of Organization for this Limited Liability Company Florida document number 1.21000412348 | were filed on 09/17/2021 | and ass | iigned | |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | | | |
| BRIGHT RESEARCH CENTER LLC | | | | |
| The new name must be distinguishable and contain the words "Limited Liabil | lity Company," the designation "LLC" or the al | breviation "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 nan | ne of the ne | w regis | tere |
| agent and/or the new registered office address here: | ; | ca p | 2921 (| |
| Name of New Registered Agent: | | *** | <u>S</u> _ | _ |
| New Registered Office Address: | | (j) .e | 20 | |
| | Enter Florida street address | 23 <u>22</u> | P | |
| | , Florida | Zip Gode | | _ |
| New Registered Agent's Signature, if changing Registered Agent: | • | 1 | | |

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 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 |

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From: Yanet Avila

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