

L21 000431740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300385982953

04/19/22--01012--024 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 JUL 25 PM 3:12

T. MATTHEWS

JUL 28 2022



RECEIVED

2022 JUL 25 PM 12:58

FLORIDA DEPARTMENT OF STATE
Division of Corporations

TALLAHASSEE

May 31, 2022

AYLEN FERNANDEZ
5600 N. FLAGLER DR. #2705
WEST PALM BEACH, FL 33407

SUBJECT: BRIGHTER SUPPLIES LLC
Ref. Number: L21000431740

We have received your document for BRIGHTER SUPPLIES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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.

Tekayla T Matthews
OPS

Letter Number: 422A00012212

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Brighter Supplies LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Aylen Fernandez
Name of Person

Firm/Company

5600 N Flagler Dr Apt 2705
Address

West Palm Beach FL 33407
City/State and Zip Code

brightersuppliesllc@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aylen Fernandez at (561) 729-9921
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
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
OF**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Brighter Supplies LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

22 JUL 25 PM 3:12

The Articles of Organization for this Limited Liability Company were filed on 10/01/2021 and assigned Florida document number L21000431740

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)

2430 Ware Drive
West Palm Beach, FL 33409

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2430 Ware Drive
West Palm Beach, FL 33409

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:

Aylen Fernandez

New Registered Office Address:

2430 Ware Drive

Enter Florida street address

West Palm Beach, Florida 33409

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. 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>	<u>Address</u>	<u>Type of Action</u>
CEO	Marcio Dias	5600 N Flagler Drive	<input type="checkbox"/> Add
		Apt 2705	<input checked="" type="checkbox"/> Remove
		W.P.B FL 33407	<input type="checkbox"/> Change
CEO	Aylen Fernandez	2430 Ware Drive	<input checked="" type="checkbox"/> Add
		W.P.B FL 33409	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated June 7, 2022

Aylen Fernandez
Typed or printed name of signee