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Special Instructions to	Filing Officer:	
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02/07/22--01026--028 **25.00

22 APR -7 PH 3: 04

T. MATTHEWS



RECEIVED

2022 APR -7 AM 8: 04

FLORIDA DEPARTMENT OF STATE SEC ADMINISTRATE TALLAHASSEE, FL

February 21, 2022

DEISY BUSTAMANTE RESTREPO 3415 CARLTON ARMS CIR, APT C TAMPA, FL 33614

SUBJECT: D&G BRIGHT CLEANING LLC

Ref. Number: L21000491296

We have received your document for D&G BRIGHT CLEANING LLC and your check(s) totaling \$25.00. 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.

Tekayla T Matthews **OPS**

Letter Number: 422A00004192

COVER LETTER

TO: Registration So Division of Cor			
D&G Brigl	ht Cleaning LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and feets) are sub	mitted for tiling.	
Please return all correspo	ondence concerning this matter	to the following:	
	Deisy Bustamante Restrep	o	
		Name of Person	
	D&G Bright Cleaning LLC	••	
		Firm/Company	
	3415 Carlton Arms Circle	Apt, C	
		Address	
	Tampa FL 33614		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	de isybustamante 70 (aggmail,	com to be used for future annual report noti	firstion)
For further information of	concerning this matter, please c		
Deisy Bustamante Restr		904 3340631	
Name (of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	ction
Division of C	Corporations	Division of Cor	porations
P.O. Box 633	77	The Centre of T	fallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT

22 APR -7 PH 3: 04

D&G Bright Cleaning LLC

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited Liability Company Florida document number $\frac{4.21000491296}{1.21000491296}$.	were filed on November 15, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility 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 n:	ime of the new register
agent and/or the new registered office address here:		
agent and/or the new registered office address here: Name of New Registered Agent:		
Name of New Registered Agent:	Emer Florida street address	

referry accept the appointment as registered agent and agree to act in this capacity, Further agree to comply with 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
			□Add
			□Remove
			□Change
			□Remove
			☐ Change
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Dated _	· · · · · · · · · · · · · · · · · · ·
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	Down 1/2 K
	Signature of a member of authorized representative of a member

Filing Fee: \$25.00