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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Th	inking Bric Name of Lim	ited Liability Company	nce LLC
The enclosed Articles of A	mendment and fee(s) are sub	emitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
		Luis Colon	
		Name of Person	
	Thinking	ng Bright Mai	intendince LLC
	1077 SUMM	nit trail cir=	#D
	West Palm	Beach FL 33	3415
	Luisjcolon ^c E-mail address: (Beach FL 33 City/State and Zip Code 17@Graci 1. Com 10 be used for future annual report no	otification)
For further information co	ncerning this matter, please c		1.3
Luis	Colon	at (561) 883	8 9063 P
Name of	Person	Area Code Dayti	8 9063 PH 22 PH 22 PH 25
Enclosed is a check for the	following amount:		
☑ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Se Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations	Street Address: Registration S Division of Co The Centre of 2415 N. Monr	orporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 Dec 13, 2021 and assigned Florida document number <u>L 21</u>000523693 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

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.

City

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
MGR	Luis) Colon	1077 Summit trail cir	🛮 Add
		#D, West Palm Beach, Fl	□ Remove
		33415	□Change
AMB12	Luis J Colon	1077 Summit trail Cir #D. West Palm Beach, FL	⊠Add
		#D. West Palm Beach, FL	□Remove
		33415	□Change
			□Add
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Filing Fee: \$25.00