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To:

Division of Corporations Fax Number : (850)617-6383

From:

33

Account Nate : CLARA GIRALDO ERROLLED AGENT Account Number : 119990000017 Phone : (305)485-9300 Fax Number : (305)485-1098

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

BRIGH WORLD, LLC

No. 1980 Sept. Street or other Delivery of the Control of the Sept. Sept	Carlo Later Later Street Street Contract Contrac
Certificate of Status	<u> </u>
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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	Liability Compar Florida Linuted L	ny as it now appears on our records.) iability Company)		
The Articles of Organization for this Limited Liab	bility Company	were filed on <u>08/09/2022</u>	and assigned	i
Florida document number L22000348259				
	vina:			
This amendment is submitted to amend the follow		homo.		,
A. If amending name, enter the new name of t	the <u>limited liab</u>	ility company nere:		
N/A		" Company" the designation "LLC" or the ab	breviation "L.L.C."	•
N/A The new name must be distinguishable and contain the wo	ords "Limited Liani			
Enter new principal offices address, if applica	ble:	N/A		
(Principal office address MUST BE A STREET	(ADDRESS)			
		N/A		
Enter new mailing address, if applicable:		Mex		
(Mailing address MAY BE A POST OFFICE I	ting address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or re	egistered office	address on our records, enter the nar	ne of the new re	gistered
agent and/or the new registered office address	s here:		~	
			SEP Alla	2:
Name of New Registered Agent:	N/A		<u> </u>	722
I Desistand Office Address:			- [1]	- 126 9
New Registrated Order Faculty	New Registered Office Address: Enter Florida street address	ಸ್ವರ್ಭ ಚ ಎಕ್ ಬ	i E	
		, Florida _	Ziā Code	
7		Cıŋ		
as One-in- Agantic Signature, if changing	Registered Agen	t:	orga to comply	with the
I hereby accept the appointment as registere provisions of all statutes relative to the prop	ed agent and ag	gree to act in this capacity. I juriner a to performance of my duties, and I an	gree to comply 1 familiar with t	and
provisions of all statutes relative to the prop	er una compre		r, if this docum	ent is
Laing filed to merely reflect a change in the	registered by	ce address, I hereby confirm that the i	limited Hability	
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
MGR SALES, JULIAN		150 SE 2ND AVE STE 321	
		MIAMI, FL 33131	■Remove
			Change
<u> </u>			DAdd
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			□Remove
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Vote: If the d	ate inserted in this blue	k dues not meet	the applicable:	statutory filing re	quirements, this da	te will not be listed a	15 TF
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record specif d is filed.	ies a delayed effective o	ale. Dul not an e	effective time, a	g 12:01 a.m. om u	ne estrict of. (0)	The your day divine an	
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