(shown below) on the top and bottom of all pages of the document.

(((H23000147874 3)))



**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

**Enter	the	email	address	for	this	busin	ess	entity	to	be	used	fo <u>r</u>	future
าเบล็ฐรู้an	nual	repor	t mailin	gs.	Enter	only	one	email	add:	res	s ple	asè:•	* *

Email	Address:	 		
•				

## LLC REGISTERED AGENT CHANGE **BRIGHT PHOENIX LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

T. LEMIEUX

HelpAPR 2 1 2023

Corporate Filing Menu

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	nme of the limited liability company: Bright	Phoenix	LLC	·			
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		dailing address of (Note: MAY BE	limited liabili	ty comp	-	
	11/18/22	0494657	7				
3.	Date of filing/registration in Florida	4.		Document nur	nber		
5. (a)	UNITED STATES CORPORATION AG	ENTS, INC.					
	Registered Office Address (MUST BE FLORIDA STR						
	JACKSONVILLE	_, FL_ 32202					
(b)	Registered Agents Inc						
(0)	Enter name of NEW Registered Agent and/or NEW Regis	stered Office addr	2SS:	•			
	7901 4th St N				<b>5</b>	202.	
	NEW Registered Office Address.				~	5.3 E202	
	STE 300				•	V2	
	St. Petersburg	_, <sub>FL</sub> 33702				) PH	Ľ,
the cha agent v was/wa	imited liability company is not organized under thange or changes are made, the Florida street addrewill be identical. Or, in the case of a Florida limiter authorized by an affirmative vote of the membicles of organization or the operating agreement of	ess of the registe ted liability com bers of the limite	red office pany, it is ed liability	and the busine shereby confir y company or a	ess office o med that th	f <del>the</del> re e chang	gistere ge(s)

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.

David Roberts - Assistant Secretary

**ROBIN JONES** 

Printed or typed name of signee

Signature of a member or authorized representative of a member