

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

L22000506560

Note: Please print this page and use it as a cover sheet. Type the fax and phone number (shown below) on the top and bottom of all pages of the document.

(((H24000223009 3)))



H240002230093ABCW

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 : RC TAX SERVICE LLC  
 Account Number : I20140000083  
 Phone : (407)932-0040  
 Fax Number : (407)520-5473

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

2024 JUN 28 PM 1:48

FILED

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  
 BRILLIANT GREEN HOUSES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

M. SOLOMON  
 JUN 28 2024

RECEIVED

2024 JUN 28 AM 11:00

DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

### COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BRILLIANT GREEN HOUSES 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:

ANDRES HERNANDEZ  
Name of Person

BRILLIANT GREEN HOUSES LLC  
Firm/Company

12630 DREAM FALLS CIR 206 B3  
Address

ORLANDO, FL 32824  
City/State and Zip Code

andres.hernmed2017@gmail.com  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2024 JUN 28 PM 1:48

FILED

For further information concerning this matter, please call:

ANDRES HERNANDEZ at ( )  
Name of Person Area Code Daytime Telephone Number

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 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

DocuSign Envelope ID: A3B0E6B8-240F-4207-B07A-B0FAD93CA10E

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRILLIANT GREEN HOUSES, LLC

(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 12/01/2022 and assigned Florida document number L22000506560.

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2024 JUN 28 PM 1:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

---

---

---

---

---

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:

ANDRES HERNANDEZ

New Registered Office Address:

12630 DREAM FALLS CIRCLE, 206 H3

*Enter Florida street address*

ORLANDO

*City*

Florida 32824

*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.*

DocuSigned by:  
Andres Hernandez

05AD47F5DC1E430...

**If Changing Registered Agent, Signature of New Registered Agent**

FILED

DUPLICATE ENVELOPE ID: A902C00-EABF-4207-B3FA-B3FA0900910E

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>
AMBR	PIEDRA, NANCY L.	12630 DREAM FALLS CIRCLE 206 B3	<input type="checkbox"/> Add
		ORLANDO, FL 32824	<input checked="" 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

2024 JUN 28 PM 1:48  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

FILED

