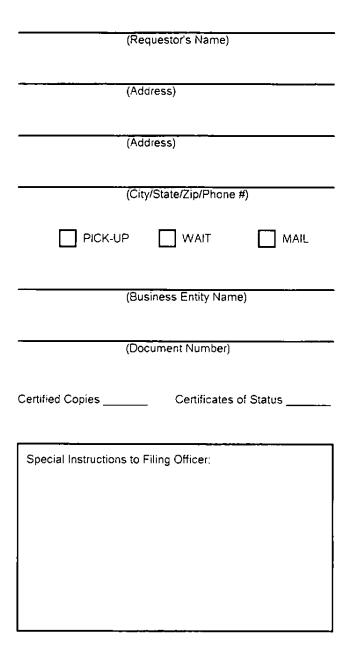
123 0000 73008



Office Use Only





300425584913

03/12/24--01024--012 **30.00

COVER LETTER

TO:	Registration Se Division of Cor				
SUD IE		DAY ADVISORS, LLC			
SUBJEC	-1: <u></u>	Name of Lin	nited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		JENNIFER ROE			
		· · · · · · · · · · · · · · · · · · ·	Name of Person		
		DAY ADVISORS. LLC Name of Limited Liability Company			
		 .	Firm/Company	 	
	1705 COLUMBIANA LN				
			City/State and Zip Code	•	
		E-mail address: (to be used for future annual report n	otification)	
For furth	er information c	oncerning this matter, please c	all:		
JENNIF	ER J ROE				
	Name o	f Person		ime Telephone Number	
Enclosed	l is a check for tl	ne following amount:			
□ \$25.	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	
	Mailing Addres Registration 5			Section	
Registration Section Division of Corporations					
	P.O. Box 632				
	Tallahassee,	FL 32314	2415 N. Mon	roe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRIGHT DAY ADVISORS, LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.)	
(1000	
The Articles of Organization for this Limited Liability Company w	and assigned	
Florida document number L23000073008		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
<u> </u>		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
• • • • • • • • • • • • • • • • • • • •		
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		<u> </u>
		~
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
	-	
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
3. If amending the registered agent and/or registered office ad agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		e of the new regis
	Enter Florida street address	
	, Florida	
	City	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.

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	SHELLEY J DOSTIE	9303 BAYSHORE RD, G 25	
		PALMETTO, FL 34221 US	□Remove
		CHANGE FROM MGR TO AMBR	■Change
AMBR	ANNE C HALLETT	4416 E 3RD ST	□ Add
		TUCSON, AZ 85711 US	5 0
			□Change
AMBR	HOWARD C HALLETT	9523 S RAINTREE DR	□ Add
		SANDY, UT 84092 US	■Remove
			□Change
			□Add
		 	
	-		□ Add
			Remove
			Change
			□Add
			□Remove
			□Change

			<u></u>	
				
				··· · · · · · · · · · · · · · · · · ·
			· · · · · · · · · · · · · · · · · · ·	
				
<u></u>				
ective date, if other than	n the date of filing:	be prior to date of filing of	(optional) more than 90 days after filing.) P	ursuant to 605 020
e: If the date inserted in t	his block does not meet the	e applicable statutory fi	ling requirements, this date wi	ll not be listed a
ument's effective date on	the Department of State's r	records.		
ord specifies a delayed ef	fective date, but not an effe	ective time at 12:01 a r	n, on the earlier of: (b) The 9	Oth day after the
filed.	detive date, out not an one		in on the carrier of (b)	our day arter un
MARCH I	2024	4		
ed	,	*		

Typed or printed name of signee