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SECRETARY OF STATE
ORIDA

Office Use Only

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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 8, 2016

EILEEN S. HILL KANE & VITAL, P.A. 6190 NW 11 ST. SUNRISE, FL 33313

SUBJECT: BRIGHT INV LLC Ref. Number: W16000047897 2016 JUL 19 PM 3: 05

We have received your document for BRIGHT INV LLC and your check(s) totaling \$1790.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The alternate name that you have chosen is not available. Please select a new name.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 716A00014378

LAW OFFICES OF KANE & VITAL, P.A. 6190 N.W 11th STREET FT. LAUDERDALE, FL 33313 Phone: 954-523-5123 Fax: 954-523-2201

LAW OFFICES ALSO AT: 16210 NE 11TH COURT NORTH MIAMI BEACH, FL 33162 DADE (305)545-5123 ALL REPLIES TO: 6190 N.W. 11TH STREET FT. LAUDERDALE, FL 33313

July 18, 2016

Florida Department of State Division of Corporations P. O. B 6327 Tallahassee, Fl. 32314 Attn: Karen A. Saly

Re: BRIGHT INV. LLC REF#: w16000047897 Ltr. # 716A00014378

Ms. Saly,

I am returning your rejection letter of our recent request with the revisions you requested.

I trust this will be adequate to complete our filing request but if there are any problems or questions please feel free to contact me at the phone number or email address below.

Sincerely,

Eileen S. Hill, J.D.

Paraleaal

954-792-2130 direct #

accuratelady@eshinc.comcastbiz.net

COVER LETTER

TO:

TO:	Registration Section Division of Corporation	, , , , , , , , , , , , , , , , , , ,				
SUBJE	BRIGHT INVESTM					
		Name of	Limited Liability	Company		
The enc Existen	losed "Application by Fore	eign Limited Liability Comp to register the above refero	pany for Authoriza enced foreign limi	ntion to Tra ted liability	ansact Business in Florida," y company to transact busin	Certificate of ess in Florida
Please r	eturn all correspondence co	oncerning this matter to the	following:			
	EILEEN S. HIL	L				
		N	ame of Person		· · · · · · · · · · · · · · · · · · ·	
	KANE & VITA	L, P.A.				
		Fi	irm/Company			
	6190 NW 11 ST					
			Address			
	SUNRISE, FL.	33313				
		City/S	tate and Zip Code			
	accuratelady@esh	inc.comcastbiz.net				
		E-mail address: (to be used	d for future annua	report not	ification)	
For furt	her information concerning	this matter, please call:				
	EILEEN S. HILL		954 at (792-21		
	Name of	Contact Person	Area Code	Day	time Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle iee, FL 32301	
Enclose	d is a check for the followi	_	— 61.66.00 D W	r. 0	F 61(0.00 F) F G	A* F**
	□ \$125.00 Filing Fee	■ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filis Certified Copy	ig ree &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop	

'APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

BRIGHT INVESTMEN	•			
	eign Limited Liability Company; mus		ny," "L.L.C.," or "LLC.")	
	TMENTS IL LLO			
Liability Company," "L.L.C,		e of transacting business in Florida.	The alternate name must include "Limited	ı
2. OREGON		3.	ber, if applicable)	
company is organized)	of which foreign limited liability	(FEI num	ber, if applicable)	
4. March 14, 2008				
	(See sections 605.0904 & 605.	ss in Florida, if prior to registration. 0905, F.S. to determine penalty liab	.) oility)	
5. 6531 NW 18 AVE.			_	
PLANTATION, FL. 3	2016 JUL 19 PM 1: 85 TAILLAHASSEE, FLORID	`** >		
	(Street Address of I	rincipal Office)	A	ا تبهي
6. C/O KANE & VITAL,	, P.A.		75 T	
6190 N.W. 11 ST., SU	NRISE EL 33313		ETO P	11
017011.11.01.,00	(Mailing A	Address)	TS I	
7 Name and stores 41				
/. Name and street addres	ss of Florida registered agent: (P.	O. Box NOT acceptable)	5m 5	
Name:	EILEEN S. HILL			
Office Address:	C/O KANE & VITAL, P.A.; 61	90 N.W. 11 ST.		
	SUNRISE	, Florida _	33313	
	(City)	, 1101100	(Zip code)	
designated in this applica to complywith the provision	gistered agent and to accept servition, I hereby accept the appoint	ment as registered agent and ag	ted limited liability company at the pla gree to act in this capacity. I further o nce of my duties, and I am familiar w	agree
		7		
	(Regist	ered agent's signature)		
8. The name, title or capa JANUSZ OSTROWSKI	acity and address of the person(s)	who has/have authority to mana	ge is/are:	
C/O KANE & VITAL, P.	Α.			
6190 N.W. 11 ST.; SUNF	RISE, FL. 33313			
9. Attached is a certificate jurisdiction under the law of the translator must be so	of which it is organized. (If the ce	ys old, duly authenticated by the ertificate is in a foreign language MANAGE	official having custody of records in t, a translation of the certificate under o	he Sath
	Signature	of an authorized person		
This document is executed submitted in a document to	d in accordance with section 605.0 the Department of State constitu	203 (1) (b), Florida Statutes. I attes a third degree felony as provi	m aware that any false information ided for in s.817.155, F.S.	
	JANUSZ OSTROWSKI			

Typed or printed name of signee

State of Oregon

OFFICE OF THE SECRETARY OF STATE Corporation Division

Certificate of Existence 345K153C6

I, JEANNE P. ATKINS, SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

BRIGHT INVESTMENTS LLC

is

Organized

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

Jeanne & atkins

JEANNE P. ATKINS, SECRETARY OF STATE

2/25/2016