NO/00001239

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
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RA Ro change

T. Roberts WN 1 5 2006

6 JUN -8 AM 9: 43
ECCRETARY OF STATE
AHASSEE, FLORID

COVER LETTER

Division of	nt Section f Corporations					
SUBJECT:_Brigh	nt Futures International, Inc. (Name of Co	rporation)				
DOCUMENT NU	MBER: N01000001239					
The enclosed State	ment of Change of Registered Office	Agent and fee are submitted for filing.				
Please return all co	rrespondence concerning this matter	to the following:				
	Kathleen W. Schoenberg					
•	(Name of Con	tact Person)				
Kathleen W. Schoenberg, P.A. (Firm/Company)						
	,					
_	1050 Brooks Lane	<u> </u>				
	(Addre	ess)				
7	Delray Beach, FL 33483					
<u> </u>	(City/State and	Zip Code)				
For further informa	tion concerning this matter, please ca	ıll:				
Kathleen W. Schoen	nberg	at (561) 350-3343				
(Na	me of Contact Person)	at (561) 350-3343 (Area Code & Daytime Telephone Number)				
Enclosed is a \$35.0	0 check made payable to the Departn	nent of State.				
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle						

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	rovisions of sections 607 age is submitted for a con to change its registered	poration organize	d under the law	s of the State of Fl	orida		
	e corporation: Bright Fu		•	, ar are of an er a ro	i iddi.		
	office address: 757 Lightl			33408			
D. The principal			<u> </u>	, ···•			_
3. The mailing ac	dress (if different): same	as above					
4. Date of incorp	oration/qualification: 2/2	21/01	_ Document no	umber: N010000012	239		
5. The name and Florida Depart	street address of the curn ment of State:	ent registered agen	t and registered	office on file with	the		
	Keith W. Davis, Esq.				ALL	8	
•	309 Lake Ave.				RETAI	JUN -8	F
	Lake Worth, FL 33460				333 SY OF	8 4	FILED
6. The name and (if changed):	street address of the new	registered agent (i.	f changed) and	/or registered office	STATE FLORIDA	9: \ 3	
	Kathleen W. Schoenberg,	Esq.					
	050 Brooks Lane						
•	(P.O. E	ox NOT acceptable)					
	Delray Beach, FL 33483						
The street address as changed will l	s of its registered office se identical.	and the street add	lress of the bus	siness office of its r	egistered a	gent,	
Such change was authorized by the	authorized by resolution board, or the corporati	n duly adopted by on has been notifi	tits board of ded in writing o	irectors or by an of f the change.	ficer so		
Jauly (Signatur	L. Avaller of director)	<u> </u>	BIL	BOOVED F. J		<u> </u>	
I hereby accept to I further agree to of my duties, and document is bein corporation has	he appointment as regis comply with the provis I am familiar with and g filed merely to reflect been notified in writing	tered agent and a ions of all statute accept the obliga a change in the re of this change.	gree to act in to relative to the tion of my posi egistered office	his capacity, e proper and complition as registered a e address, I hereby	lete perform agent. Or confirm tha	mance if this at the	
Love (D)	ean.		5-25	-06			
If signing on beh	alf of an entity:			(Daic)			
	ped or Printed Name)	 _					

* * * FILING FEE: \$35.00 * * *