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And

R. WHITE SEP 26 2018



## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	Bright	Work Inc	
DOCUMENT NUMBER:			
The enclosed Articles of Amendm	ent and fee are subr	nitted for tiling.	
Please return all correspondence co	oncerning this matte	er to the following:	
	My	IA TOOHLU Name of Contact Perso	
	Brig	ht Worx Firm/Company	Inc
	100 S	Belcher S	#5587
	Clea	www.les I City/ State and Zip Cod	2 33758
E-m <b>a</b> il	in to @	Bright Work	
For further information concerning	g this matter, please	call:	
Name of Contact P	erson	at ( <b>-813</b> Area Co	) 450 6235 de & Daytime Telephone Number
Enclosed is a cheek for the following	ing amount made pa	yable to the Florida Depa	artment of State:
	75 Filing Fee & ficate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Cliftor	Address Iment Section on of Corporations of Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## FILED

2018 SEP 24 AM 11: 41

(Name of Corpora	tion as currently fil	ed with the Florid	Dopt of States;	STATE
			TALLAHASSE	Ĕ, FÎ
(Docu	ument Number of Co	, rporation (if known	)	
, , ,		,	,	
Pursuant to the provisions of section 607.1006, Florids Articles of Incorporation:	da Statutes, this Flor	rida Profit Corpora	tion adopts the foll	owing amendment(
A. If amending name, enter the new name of the	corporation:			
				The new
name must be distinguishable and contain the wa "Corp.," "Inc.," or Co.," or the designation "Corword" chartered," "professional association," or th	rp," "Inc." or "Co"	. A professional c	ncorporated" or to orporation name n	he abbreviation nust contain the
3. Enter new principal office address, if applicab	ole:	•		
(Principal office address <u>MUST BE A STREET AD</u>			·	
	_			
	-	<del>-                                    </del>		<del>-</del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	$g_{OX_1}$			
maning address street to the control of the control	<u> </u>			<u> </u>
,	• _	•	•	
	_		*	
D. If amending the registered agent and/or regist		<u>in Florida, enter t</u>	he name of the	
new registered agent and/or the new registere	d office address:			
Name of New Registered Agent		·		
<del></del>	(Florida street o	ıddress)		
New Registered Office Address:			. Florida	
A Regimered Spice Manager	/Cit,	יט		(Zip Code)
New Registered Agent's Signature, if changing Re			e a catalogica	
I hereby accept the appointment as registered agent.	. I am familiar with	and accept the obli	gations of the posit	ion.
	anatore of New Peak	stand Janut if char	ino	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	$\sqrt{}$	Johnathan Voyt	6203 Houell way Louisville Ky 4029
<u></u> ✓ ∧dd		J	Louisville Ky 4029
Remove			
2) Change			
Add			
Remove			
3 ) Change			•
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
			<u> </u>
		<u> </u>	
<del></del>			
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		<del> </del>	
f an amendment provides for an exch	hange, reclassification, or c	ancellation of issued s	hares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in	the amendment itself	
(y ma appreniate, material (m))			
· · · · · · · · · · · · · · · · · · ·	<del>-</del>		<del></del>

The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature
selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)  WYA Too Hey  (Typed or printed name of person signing)
(Title of person signing)