P21000097568

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Bright Construction	n & Consultant Inc			
	BER: P21000097568				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Abel Urra				
	Name of Contact Person				
	Bright Construction & Consultant Inc				
		Firm/ Company			
	17840 NW 59 AVE, Unit 101				
	Address				
	Hialeah,Florida 33015				
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	;		
	aurra1975@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Abel Uita		at (<u>786</u>	7027800 _)		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate 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)		
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassec, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment

Articles of Incorporation

of

Bright Construction & Consultant Inc

(Name of Corporat	tion as currently filed with the Flori	da Dept. of State)
P21000097568		
(Docu	iment Number of Corporation (if know	n)
Pursuant to the provisions of section 607.1006. Floridits Articles of Incorporation:	da Statutes, this <i>Florida Profit Corpor</i>	ation adopts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:	
name must be distinguishable and contain the word "o"." or Co.," or the designation "Corp," "Inc. "chartered," "professional association," or the abbi	;" or "Co". A professional corpor	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B)	<u>OX</u>)	
D. If amending the registered agent and/or registence new registered agent and/or the new registered	ered office address in Florida, enter d office address:	the name of the
Name of New Registered Agent		<u> </u>
	(Florida street address)	77 · 6 · 11
New Registered Office Address:	(City)	Florida (Zip-Ende)
New Registered Agent's Signature, if changing Re	gistered Agent:	Oi.
I herchy accept the appointment as registered agent.	I am familiar with and accept the ob	ligations of the position.
Sign	nature of New Registered Agent, if cha	nging
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s.		

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.

X Change	<u>P.L</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jor	<u>nes</u>	
X Add	<u>SV</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	VP	_	Abel Urra	17840 nw 59 avw,unit 101
Add				Hialeah,Fl 33015
X Remove				
2) Change		-		
Add				
Remove Change		-		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		-		
Remove				

nending or adding additional Arti th additional sheets, if necessary).	(Be specific)
<u> </u>	
<u> </u>	
<u> </u>	
	to a section of cancellation of issued sharps
<u>amendment provides for an exc</u> eptions for implementing the am	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:
(if not applicable, indicate N/4)	

The date of each amendment(s) ad	loption:, if other	than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be liste partment of State's records.	d as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adoption was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado by the shareholders was/were sui	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
11/23/2021 Dated		
Signature	A	
selected	rector, president or other officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Abel Urra	
	(Typed or printed name of person signing)	
	President	

(Title of person signing)