## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000312958

Entity Name: OFFER - BOX LLC

inal Blace of Business

**Current Principal Place of Business:** 

12550 BISCAYNE BLVD STE 218

NORTH MIAMI, FL 33181

**Current Mailing Address:** 

12550 BISCAYNE BLVD STE 218

NORTH MIAMI, FL 33181 US

FEI Number: 85-3495359 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ESCOBAR, LINA MARIA MS 5040 FRATTINA ST AVE MARIA, FL 34142 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LINA MARIA ESCOBAR 04/23/2024

**Electronic Signature of Registered Agent** 

Date

FILED Apr 23, 2024

**Secretary of State** 

3413579406CC

Authorized Person(s) Detail:

**STE 218** 

Title MGR Title MGR

Name FONSECA, DIEGO ALBERTO MR Name ESCOBAR, LINA MARIA MS

Address 12550 BISCAYNE BLVD Address 12550 BISCAYNE BLVD

STE 218

City-State-Zip: NORTH MIAMI FL 33181 City-State-Zip: NORTH MIAMI FL 33181

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DIEGO ALBERTO FONSECA

**MGR** 

04/23/2024