

LO400033582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

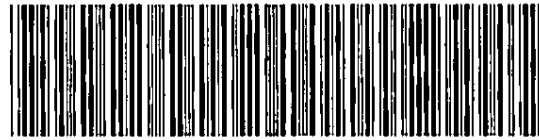
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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10/06/17--01027--011 **65.00

DIVISION OF

17 OCT 23 AM 10:25

FILED

D. SIMMONS
OCT 24 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 9, 2017

DAVID HOLT
3521 ENTERPRISE WAY
MIRAMAR, FL 33025

SUBJECT: UBOXES, LLC
Ref. Number: L04000033582

We have received your document for UBOXES, LLC and your check(s) totaling \$65.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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

Octavia L Simmons
Regulatory Specialist II

Letter Number: 017A00020350

2017 OCT 23 AM 8:16

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

Gentlemen:

We inadvertently did not include page 3/3 of the change of registration. Here as a completed form with page 3/3.

A check was included in the previous submission a copy of which is attached. To help you locate the original submission the Post office tracking number is 9505 5139 4972 7277 1278 240

Thank You

2017 OCT -6 PM 12:54

TALLAHASSEE, FLORIDA

No \$

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Change of Management and Ownership
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David James Holt

Name of Person

uBoxes, LLC

Firm/Company

3521 Enterprise Way

Address

Miramar, FL 33025

City/State and Zip Code

djholt@BELLSOUTH.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JamesHold

954

253-2693

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

uBoxes, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on May 3, 2004 and assigned
Florida document number LO4000033582.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

3521 Enterprise Way

(Principal office address MUST BE A STREET ADDRESS)

Miramar, FL 33025

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

David James Holt

New Registered Office Address:

3521 Enterprise Way

Enter Florida street address

Miramar

Florida 33025

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Managing	David James Holt	3521 Enterprise Way, Miramar, Fl	<input checked="" type="checkbox"/> Add
		Ruben Pinchanski	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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11:10:25

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

17 OCT 23 AM 10:25
DIVISION OF CORRECTIONS

FILED

E. Effective date, if other than the date of filing: Sep 30, 2012 (optional)

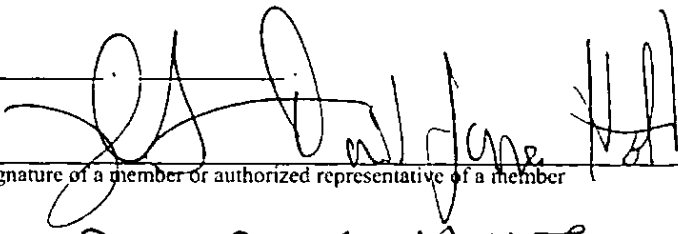
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: 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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated October 4, 2017


Signature of a member or authorized representative of a member

DAVID J. HOLT

Typed or printed name of signee