## L12000009337

(Red	questor's Name)				
(Add	dress)				
(Add	dress)				
(City	//State/Zip/Phor	ne #)			
PICK-UP	☐ WAIT	MAIL			
(Bus	siness Entity Na	me)			
,		·			
(Doc	cument Number	)			
	•				
Certified Copies	Certified Copies Certificates of Status				
Special Instructions to F	Filing Officer:				
		·			
		_ 🛦			
		RA			



800225760138

03/26/12--01021--028 \*\*25.00

SECRETARY OF STATE OF VIVISION OF CORFORATIONS

12 MAR 26 AH 8 25

Office Use Only

B. KOHR
MAR 2 8 2012

EXAMINER

## **COVER LETTER**

10:	Division of Corporations			
SUB	JECT:	Beebox, LLC		
	Name o	of Limited Liability Company		
Dear	Sir or Madam:			
The	enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.		
Pleas	se return all correspondence concerni	ŭ .		
	•	12 HJR 26	1,41	
		7	31.4	
	Andres Angel			
	Name of Person	26		
			,,,,	
	Beebox, LLc		٤	
<del></del>	Firm/Company		₩	
	, company		3	
	9737 NW 41 St. Suite #5	33		
	Address			
	•			
	Doral, FL 33178			
	City/State and Zip Code			
	info@heehox me			
<u>I</u>	info@beebox.me E-mail address: (to be used for future annual report	rt notification)		
For fi	urther information concerning this ma	atter, please call:		
	Andres Angel	at (305)582-5410		
	Name of Person	Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS:	MAILING ADDRESS:		
	Registration Section	Registration Section		
	Division of Corporations	Division of Corporations		
	Clifton Building	P.O. Box 6327		
	2661 Executive Center Circle	Tallahassee, Florida 32314		
	Tallahassee, Florida 32301			
	Enclosed is a check for the follow	ving amount:		
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:		Beebox, LLC				
2. (a) Principal office address of limited liability compa		any:	nny: Beebox, LLC			
(Note: MUST B	E STREET ADDRESS	9737 NW 41 5 Doral, FL 331	St. Suite #533 \$\frac{1}{5}	2	100	
(b) Mailing address of	f limited liability company:	Beebo	x, LLC	25	000	
(Note: MAY BE	POST OFFICE BOX)	9737 NW 41 3 Doral, FL 331	St. Suite #533 78	强	0.5	
January 19	, 2012	L	12000009337		<u>بر</u> 	
3. Date of filing/registra	tion in Florida	4. Document nu	4. Document number			
5. (a) Registered Agent	and Registered Office shown	on the records of the	e Florida Dept. o	f State:		
Registered Agent	:	Andres Angel	Andres Angel			
Registered Office Address:		4602 NW 94 Ct Miami, FL 33178				
(b) Enter name of NE  NEW Registered	W Registered Agent and/or N	EW Registered O  Andres Angel	_			
NEW Registered	_	9737 NW 41 S	St. Suite #533	L33178		
If the limited liability corconfirmed that after the cand the business office of liability company, it is he of the members of the limor the operating agreement.	npany is not organized under the hange or changes are made, the registered agent will be idereby confirmed that the change itted liability company or as of the limited liability or as of the liability or as of t	ne laws of the State e Florida street addrentical. Or, in the ce(s) was/were authoherwise provided in any.	of Florida, it is hess of the registe ase of a Florida lrized by an affirithe articles of or	nereby Fred offic limited native vorganizati	ote on	
۸	duna Amaral					
Printed or typed name of signee	dres Angel	<del></del>				
K   K	intment as registered agent and so of all statules relative to the daccept the obligations of my this document is being filed to the limited liability composite.	d agree to act in thi proper and complet position as register merely reflect a cha any has been notifie	s capacity. I furt e performance o ed agent as prov nge in the regist d in writing of th	ther agree f my dut ided for ered offic nis chang	e to ies, in ce ge.	
Signature of Registered Agent						