Page 1 of 2



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000249091 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GUZMAN & GUZMAN, P.A.

Account Number : 120080000090

Phone : (305) 670-1991 : (305)670-1993

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BIGBOX HOLDINGS LLC**

0
0
04
S25.00

OCT. 2.7. 2014 J. BRUCE

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIGBOX HOLDINGS LLC	The same of the same of the same property	
(A Florida Li	Company as it now appears on our records mited Liability Company)	1 /
The Articles of Organization for this Limited Liability Com- Florida document number L13000127574	npany were filed on 09/10/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and end with the words "Limit	ed Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRES	SS)	
		SSS 4
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
B. If amending the registered agent and/or register registered agent and/or the new registered office address		, enter the name of the new
Name of New Registered Agent:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
New Registered Office Address:		
	Enter Florida street address	,
		rida
•	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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR ≈ Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR .	SIGMAN, LEANDRO M	9130 S DADELAND BLVD	
		STE 1509	Remove
		MIAMI, FL 33156	
MGR	MC REDDIE, CARLOS	9130 S DADELAND BLVD	■ Add
"		STE 1509	□ Remove
		MIAMI, FL 33156	
			☐ Remove
			SSEE OF Remove
			99 55
			☐ Remove
			D Remove

date this document is filed by the Florida Department of State)		
ed OCTOBER 24 2014		
ed OCTOBER 24 2014		
ed OCTOBER 24 2014		
done this document is filed by the Floride Department of Sinic) led OCTOBER 24 2014		
c effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after a date this document is filed by the Floride Department of Sinte) OCTOBER 24 2014		
ated OCTOBER 24 2014	Tective date, if other than the date of filing:	(optional)
neo	e date this document is filed by the Ploride Department of State)	to the thore than 24 duly nites
To by t	and OCTOBER 24 , 2014	
Significant of nationalized representative of a member		
Significant of principles or authorized representative of a member		
1 1 21 1 1	- / 1 - 12 - 1 - 1	ive of a member
	SIGMAN, LEANDROM Syptom or printed name of signer	

FILED 2014 OCT 24 AM 9: 15