

218000151750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

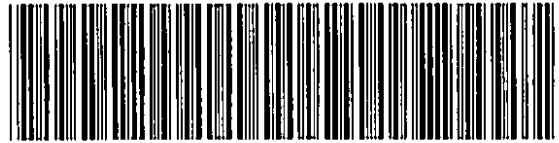
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 AUG 13 PM 12:15

N COOPER
AUG 15 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BIG BOYZ HAULERS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

JENNA SARICA

Name of Person

FPBS INC.

Firm/Company

1240 S. FEDERAL HWY

Address

BOYNTON BEACH, FL 33435

City/State and Zip Code

JENNA@FPBSONLINE.COM

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

For further information concerning this matter, please call:

JENNA SARICA

561

732-5690

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

BIG BOYZ HAULERS LLC

The Articles of Organization for this Limited Liability Company were filed on 06/20/2018 and assigned Florida document number L18000151750.

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

(Principal office address MUST BE A STREET ADDRESS)

LAKE PARK, FL. 33403

(Mailing address MAY BE A POST OFFICE BOX)

LAKE PARK, FL. 33403

SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 AUG 13 PM 12:15

LAKISHA EVANS

840 W. JASMINE DRIVE

Enter Florida street address

LAKE PARK

Florida 33403

(iv)

Zip Code

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.

Yakir Eian
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>
MGR	EVANS, DAMION		<input type="checkbox"/> Add
		6788 Heritage Grande Boynton Beach, FL 33437	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	EVANS, LAKISHA	840 W. Jasmine Drive Lake Park, FL 33403	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	EVANS, LAKISHA		<input type="checkbox"/> Add
		6788 Heritage Grande Boynton Beach, FL 33437	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Please add FEIN# 83-1006311

18 AUG 13 PM 12:15
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

E. Effective date, if other than the date of filing: _____ (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 August 9, 2018.

Lakisha Evans
Signature of a member or authorized representative of a member

Lakisha Evans
Typed or printed name of signee