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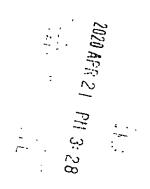
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O SIMMONS MAY 0 6 2020

COVER LETTER

TO:

Registration Section

Division of C	Corporations		
BOX CO	ONSTRUCTION LLC		
SUBJECT:	Name of L	imited Liability Company	
		,,	
The enclosed Articles	of Amendment and fee(s) are so	ubmitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
	Jorge A. Garcia-Menoca	ı	
		Name of Person	
	Garcia-Menocal Irias & I	Pastori LLP	
		Firm/Company	
	368 Minorca Avenue		
		Address	
	Coral Gables, Florida 331	34	
		City/State and Zip Code	
	jlmendoza3876@gmail.com		
For further information	concerning this matter, please of	(to be used for future annual report not	ification)
Jorge A. Garcia-Menoc			
	of Person	at () 400-9652	
· varie	A T CISON	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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 S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe	porations

Tallahassee, FL 32303

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

2020 APR 21 PH 3: 28

BOX CONSTRUCTION LLC	٠,		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears imited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Con	npany were filed on Janus	ary 28, 2020	and assigned
Florida document number L20000034932			and absigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here	2:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the desi	ignation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u> </u>		
			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of gent and/or the new registered office address here:	Mice address on our reco	ords, enter the name	of the new registere
generality of the new registered office address here:			
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:			
	Enter Florida	street address	
		, Florida	
low Pagistared Agent's Simon	City		Zip Code
ew Registered Agent's Signature, if changing Registered Ag	· 		
hereby accept the appointment as registered agent and	agree to act in this cap	acity. I further agre	e to comply with the

N

1 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 required. 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 2020 APR 21 PH 3: 28

<u>Type of Action</u> Title **Name** Address MGR Mario Colon 4160 SW 97 Court, Miami, Florida 33165 · i-□Add _____ Remove _____ □Change _____ □Change _____ □Change Remove

Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and caumo be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The effective date on the Department of State's records. The effective date on the Department of State is records. The effective date on the Department of State is records. The effective date on the Department of State is records. The effective date on the Department of State is records. The effective date of the effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the distribution of the effective date is member or authorized representative of a member. Delfina Rodriguez		<u> </u>
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Filing Fee: \$25.00