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2021 JUN 14 AM 8: 27



JUN 1 2021

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: BIGS Entertainment LLC 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:
Jeane Santos
MT TOXES and more Inc
2754 W. atlantic blud
Pompano Beach FL 33049
City/State and Zip Code Code Compared to the full control of the
For further information concerning this matter, please call:
Name of Person at (754) 209 - 5548 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$\$\$30.00 Filing Fee & Bound Filing Fe

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

Bigs	Entertair	ment 1	LU	い	
(Name of the Limited Liability) (A Florida	ty Company as it now appear a Limited Liability Company)	s on our records.)			
The Articles of Organization for this Limited Liability C	Company were filed on	5/17/2	and a	ıssigne	d
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limit The new name must be distinguishable and contain the words "Lim Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDR	11 MV nt ited Liability Company." the de	LLC_	previation '	L.L.C."	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our re	ecords, <u>enter the nam</u>	e of the n	ew res	gistered
Name of New Registered Agent:			The second	<u>1</u>	
New Registered Office Address:	Enter Flori	da street address	F 1		
		. Florida			
	City	, , , , , , , , , , , , , , , , , , ,	Zip Cod	c	

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>	Name	Address	Type of Action
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Filing Fee: \$25.00