## 122000480815

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: This was filed with an error in the entity Name

Office Use Only



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2022 NOV 17 PM 4: 35

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIG BOXES - LLC			
( <u>Name of the Limited L</u> (A F	iability Company as it now appears on our records.) Iorida Limited Liability Company)		
The Articles of Organization for this Limited Liability	ity Company were filed on 11/09/2022	and assigned	
Florida document number L22000480815			
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company here:		
BIG BOXES LLC			
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET AL	DDRESS)		
		2 82 To	
		201	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	0	S P	
		<sup>Ω</sup> <sub>22</sub> υ	
B. If amending the registered agent and/or regist agent and/or the new registered office address he		me of the new registered	
agent and/or the new registered office address ne	<u>ıc</u> .		
Name of New Registered Agent:		<del></del>	
New Registered Office Address:			
	Enter Florida street address		
	. Florida		
_	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 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>	Address	Type of Action
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ii an eiic <u>Note:</u>	re date, if other than the date of filing: 11/09/2022 (optional) etive 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records.	
e record rd is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after d.	the
Dated _	1/09/2022	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00

## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: BIG BOX	(ES. LLC				
		nited Liability Company			
The enclosed Articles of a	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	JAIME GUERRERO PAZMINO				
		Name of Person			
	BIG BOXES LLC				
		Firm/Company			
	9912 HAMMOCKS BLVD APT 103				
	MIAMI, FL 33196	Address	<del> </del>		
		City/State and Zip Code			
	JCOBOS@JECOPAG E-mail address: (	ROUP.COM to be used for future annual report no	otification)		
For further information co	ncerning this matter, please c	·	,		
			• .		
JAIME GUERRERO		at (305), 8045125			
Name of	rerson	Area Code Dayti	me Telephone Number		
Part of the sale of Sales	. F-11				
Enclosed is a check for the	-		<b>-</b>		
S25.00 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:		Street Address:			
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FI			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303