

L220000480815

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

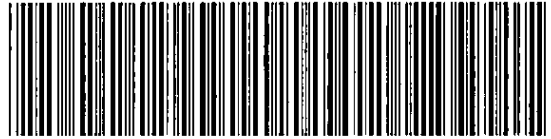
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

06213
00524
Missing
Signature

Office Use Only



300414465993

08/25/23--01009--026 **25.00

2023 1-2 PM 6:15

C.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BIG BOXES, I.L.C

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:

WINSTON N. CURTIS

Name of Person

BIG BOXES, I.L.C

Firm/Company

1800 SW 1st AVE SUITE 301

Address

MIAMI, FL 33129

City/State and Zip Code

jrporto83@gmail.com

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

For further information concerning this matter, please call:

WISNTON N CURTIS

305 4430810
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 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**

BIG BOXES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/09/2022 and assigned
Florida document number L22000480815.

This amendment is submitted to amend the following:

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

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 ADDRESS)

203017-2 P: 6: 6

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

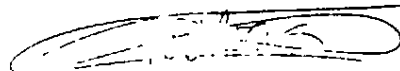
Name of New Registered Agent: WINSTON N. CURTIS

New Registered Office Address: 1800 SW 1st AVE SUITE 301
Enter Florida street address

MIAMI, Florida 33129
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>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>GUERRERO PAZMINO, JAIME F</u>	<u>1800 SW 1st AVE SUITE 301 MIAMI, FL 33129</u>	<input type="checkbox"/> Add
		<u></u>	<input checked="" type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>PORTO, JAVIER R</u>	<u>1800 SW 1st AVE SUITE 301 MIAMI, FL 33129</u>	<input type="checkbox"/> Add
		<u></u>	<input checked="" type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>MOSQUERA, DOLORES</u>	<u>1800 SW 1st AVE SUITE 301 MIAMI, FL 33129</u>	<input type="checkbox"/> Add
		<u></u>	<input checked="" type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>AGURCIA, FERNANDO</u>	<u>1800 SW 1st AVE SUITE 301 MIAMI, FL 33129</u>	<input type="checkbox"/> Add
		<u></u>	<input checked="" type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>CUBIDES, SANTIAGO</u>	<u>1800 SW 1st AVE SUITE 301 MIAMI, FL 33129</u>	<input type="checkbox"/> Add
		<u></u>	<input checked="" type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>LEAL, PEDRO</u>	<u>1800 SW 1st AVE SUITE 301 MIAMI, FL 33129</u>	<input type="checkbox"/> Add
		<u></u>	<input checked="" type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change

2023 11 02 PM 6:15

2023 11 -2 PM 6:15

(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.

Dated Sep 27, 2023

Signature of a member or authorized representative of a member

Winston W Curtis

Typed or printed name of signee



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 17, 2023

WINSTON N CURTIS
1800 SW 1ST AVE
STE 301
MIAMI, FL 33129 US

SUBJECT: BIG BOXES LLC
Ref. Number: L22000480815

We have received your document for BIG BOXES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Missing the attached form. Please complete the attached form.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin
Regulatory Specialist II

Letter Number: 623A00021431

RECEIVED
OCT 02 2023