(((H24000198381 3)))



H240001983813ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC

Account Number: I20220000070

: (888)462-3453

Phone Fax Number

: (877)919-2613

Email Address: \_\_\_\_\_ efile1234@incfile.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BOXIFY LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

M. SOLOMON

JUN - 7 2024

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## **COVER LETTER**

TO: Registration So Division of Co			(((H24000198381 3)))
0110.10200	ВОХ	OFY LLC	•
SUBJECT:	Name of Lir	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	pmitted for filing.	
Please return all correspo	ondence concerning this matter	r to the following:	
	LOVETTE DOBSON		
		Name of Person	
	-	Firm/Company	
	17350 STATE HWY 249	STE 220	202
	-	Address	2024 JOH - 12000 - 120
	HOUSTON, TX 77064		
	efile1234@incfile.com	City/State and Zip Code	
For frether information of	E-mail address: concerning this matter, please o	(to be used for future annual report notification)	0: 25
LOVETTE DOBSON	Ameering out mater, preuse o	1 (888) 462-3453	
Name o	of Person	nt () Area Code Daytime Telephone	Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)  Copy (additional copy is enclosed)	60.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
<u>Mailing Addre</u> Registration	Section	Street Address: Registration Section	
Division of C P.O. Box 632	-	Division of Corporations The Centre of Tallahasse	
Tallahassee,		2415 N. Monroe Street, S	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H24000198381 3)))

(((H240001983813)))

	BOXIFY LLC	
(Name of the Limited Liabil (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability of Florida document number L23000313531	Company were filed on <u>06/30/2023</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited Hability company here:	
DAVENPORT BOUNCE HOUSE RENTALS I.LC		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the at	obreviation "L.L.C."
Enter new principal offices address, if applicable:		, l Na
(Principal office address MUST BE A STREET ADD.	RESS)	12 / 1 NO
		(g) 1 T
Enter new mailing address, if applicable:		The second second
(Mailing address MAY BE A POST OFFICE BOX)		54 6
		,
B. If amending the registered agent and/or registered agent and/or the new registered office address here:  Name of New Registered Agent:		ie of the new registered
New Registered Office Address:		
	Enter Florida street address	
	, Florida Cuv	Zip Code
New Registered Agent's Signature, if changing Registere	·	rap ceare
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change	and agree to act in this capacity. I further ag complete performance of my duties, and I am agent as provided for in Chapter 605, F.S. Or, red office address, I hereby confirm that the li	familiar with and if this document is
	If Changing Registered Agent, Signature of New Re	gistered 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:

(((H24000198381 3)))

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
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			□Remove
			Change
			□Remove
			□ Changer
			□Changer □DAdd -
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