

6/4/24, 4:49 PM

Division of Corporations

L23000524469

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000196753 3)))



H240001967533ABC4

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 : EXPRESS BUSINESS & TAX SERVICES INC  
Account Number : I20220000138  
Phone : (786)239-9353  
Fax Number : (305)675-8465

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: AIMET@EXPRESSTAXSVCS.COM

RECEIVED

2024 JUN -5 AM 8:13

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2024 JUN -5 AM 9:46

FILED

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
BIG JOHN PETROLEUM LLC

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

M. SOLOMON  
JUN - 5 2024

Electronic Filing Menu

Corporate Filing Menu

Help

### COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BIG JOHN PETROLEUM 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:

SUBROTO SARKAR

Name of Person

BIG JOHN PETROLEUM LLC

Firm/Company

4501 NW 36 ST

Address

MIAMI, FL 33166

City/State and Zip Code

AIMET@EXPRESSTAXSVCS.COM

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2024 JUN -5 AM 9:46

FILED

For further information concerning this matter, please call:

SUBROTO SARKAR

305

364-5123

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 JOHN PETROLEUM 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 1/21/2023 and assigned Florida document number L23000524469

This amendment is submitted to amend the following:

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

ANIKA ENTERPRISES LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

7600 JUNIPER ST

(Principal office address MUST BE A STREET ADDRESS)

MIRAMAR, FL 33023

Enter new mailing address, if applicable:

7600 JUNIPER ST

(Mailing address MAY BE A POST OFFICE BOX)

MIRAMAR, FL 33023

2024 JUN -5 AM 9:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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:

MD ABDUL MUKIT

New Registered Office Address:

7600 JUNIPER ST

*Enter Florida street address*

MIRAMAR

Florida 33023

*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.*

*MD Abdul Mukit*

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

Title	Name	Address	Type of Action
AMBR	MD ABDUL MUKIT	7600 JUNIPER ST	<input checked="" type="checkbox"/> Add
		MIRAMAR, FL 33023	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Subroto Sarkar	4501 NW 36 ST	<input type="checkbox"/> Add
		Miami, FL 33146	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2024 JUN -5 AM 9:46

FILED

