

L24000352600

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

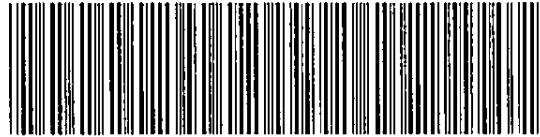
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SEP 19 2024 11:00 AM

FILED

2024 SEP 19 PM 2:40

SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

2024 SEP 19 PM 2:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AB

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Boxxed up 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:

Kelsey Kimble
Name of Person

Boxxed up LLC
Firm/Company

~~Boxxed up LLC~~ 823 Broad St.
Address

Augusta Ga 30901
City/State and Zip Code

~~Kelsey Kimble~~ Boxxedupfrighth@gmail.com
E-mail Address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kelsey Kimble at (850) 274 7207
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 x2 ☐ \$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

FILED

Boxxed Up LLC

2024 SEP 19 PM 2:40

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

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on Sept 10, 2024 and assigned
Florida document number L24000352600

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)

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:

Relsey Kimble

New Registered Office Address:

1238 Cross Creek Circle #2

Enter Florida street address

Tallahassee

Florida

32301

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.

K. Kimble

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>
MGR	Phoenix Kimble	1238 W Tharpe St. Tallahassee FL, 32301	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Kelsey Kimble	1238 Cross Creek Cir #2 Tallahassee FL, 32301	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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[illegible]

(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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated Sept 19, 2024.

Lelsey R.
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Kelsey K. m 66

Typed or printed name of signee

Filing Fee: \$25.00