

121 000 442 196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

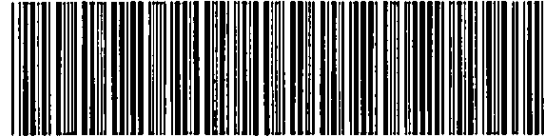
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Special Instructions to Filing Officer:

Spoke to Alton,  
authorized to make  
corrections for business  
name, remove "B" - Add "S"  
Q. SILAS  
12/1/21

DEC - 1 2021

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FILED  
2021 NOV - 8 PM 1:25  
SECRETARY OF STATE  
TAMU

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

BOSS Billion Bawses, 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:

Alta Monestime

Name of Person

BOSS Billion Bawses, LLC

Firm/Company

P.O. Box 822043

Address

Pembroke Pines, FL 33082

City/State and Zip Code

altam@bossbillionbawses.com

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

For further information concerning this matter, please call:

ALTA Monestime

Name of Person

at (561) 771-0555

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

FILED

BOSS BILLION BAWSES, LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

202 NOV -8 PM 1:25

SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 10/11/2021 and assigned  
Florida document number L21000442196

This amendment is submitted to amend the following:

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

**BOSS BILLION BAWSES, 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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

N/A

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>	<u>Address</u>	<u>Type of Action</u>
CEO	Alta Monestime	3350 SW 148th AVENUE	<input type="checkbox"/> Add
		MIRAMAR FL 33027 UN	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
E	Alta@bossbillionbrauses.com	P.O. Box 822043	<input type="checkbox"/> Add
		Pembroke Pines, FL 33082	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
EIN	87-3020194	P.O. Box 822043	<input type="checkbox"/> Add
		Pembroke Pines, FL 33082	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
TEL	561-771-0555	P.O. Box 822043	<input type="checkbox"/> Add
		Pembroke Pines, FL 33082	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
WEB	Bossbillionbrauses.com	P.O. Box 822043	<input type="checkbox"/> Add
		Pembroke Pines, FL 33082	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Alta Monestime, BS	P.O. Box 822043	<input checked="" type="checkbox"/> Add
	RMC, CPMA, PRN	Pembroke Pines, FL 33082	<input type="checkbox"/> Remove
		(561) 771-0555	<input type="checkbox"/> Change
		(561) 771-0555	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please remove current information under  
Authorized person / And ADD

MBR

Alta Monestime, BS PMC, CPMA, PRN  
P.O. Box 822043, Pembroke Pines, FL 33082  
561-771-0555

E. Effective date, if other than the date of filing: 11/01/2021 (optional)

(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.

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

November 01, 2021

  
Signature of a member or authorized representative of a member

Alta Monestime

Typed or printed name of signee