

L09000102709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

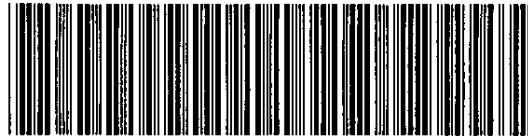
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE OF ILLINOIS

JUL 31 2015

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 21, 2015

ELIABETH LLORENTE
1822 GREEN RIDGE ROAD
TAMPA, FL 33619

SUBJECT: TCOB LOGISTICS LLC
Ref. Number: L09000102709

The merger or share exchange should be signed by the chairman or vice chairman of the board of directors, the president or any other officer for each corporation involved in the merger or share exchange.

The enclosed annual report or reinstatement application and fee(s) must be submitted before the Revocation of Articles of Dissolution can be processed. Please complete and return the enclosed annual report or reinstatement application and the appropriate fee(s) to the PERSONAL AND CONFIDENTIAL ATTENTION of the undersigned.

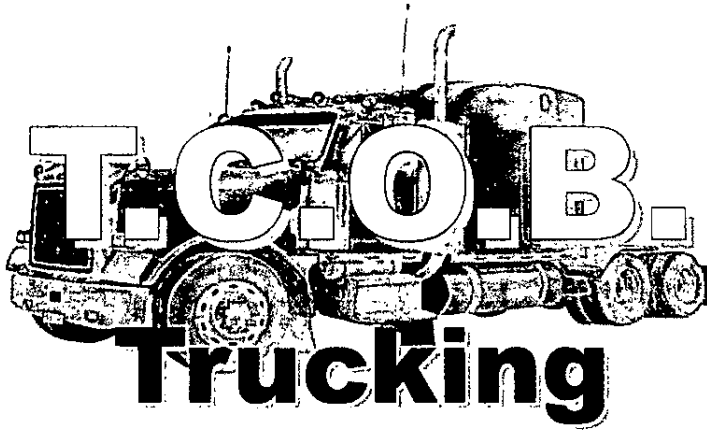
There is a fee of \$138.75 due.

Please return 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.

Stacey M Mason
Regulatory Specialist II

Letter Number: 315A00015272



1822 Green Ridge Road
Tampa, Florida 33619-4963

(813) 966-9447 Office/Cell
(813) 925-6921 Fax

tcobtrucking@gmail.com

July 2, 2015

To: Registration Section
Division of Corporation

To Whom It May Concern:

I am reopening up the company, but there are a few changes that has been done. I am not sure what application needs to be file in order to make the changes, so I have included them here in this letter.

The following changes are:

Old LLC Name: TCOB Logistics LLC
New LLC Name: TCOB Trucking LLC

Old EIN: 27-1135047
New EIN: 47-4183306

Everything else stays the same. Please let me know if there is any other document that is needed, you may either call me at (813) 966-9447 or email me at tcobtrucking@gmail.com. I appreciate your assistance in the matter.

Sincerely,

Elizabeth Llorente
Owner of TCOB Trucking

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2015 JUL 20 P 3 11
TAMPA
FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TCOB Logistics LLC

Name of Limited Liability Company

The enclosed Statement of Revocation of Dissolution for Florida Limited Liability Company and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Elizabeth Llorente

Contact Person

Firm/Company

1822 Green Ridge Road

Address

Tampa, Florida 33619

City, State and Zip Code

tcobtrucking@gmail.com

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

For further information concerning this matter, please call:

Elizabeth Llorente

at (813)

966-9447

Name of Contact Person

Area Code

Daytime Telephone Number

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

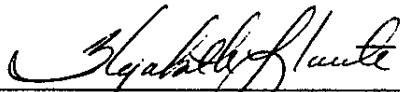
MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**STATEMENT OF REVOCATION OF DISSOLUTION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

Pursuant to section 605.0708, Florida Statutes, this Florida limited liability company revokes its articles of dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the articles of dissolution.

1. The name of the company is: TCOB Logistics LLC
2. The document number of the company is L09000102709
3. The effective date the Dissolution was filed is 04/01/2015
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.
4. The revocation of dissolution was authorized on 03/12/2015
5. A copy of the Articles of Dissolution is attached.



Signature of person authorized to submit the revocation of dissolution

Filing Fee: \$100.00
Certified Copy: \$30.00 (optional)

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TALLAHASSEE