

LI 00000001126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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10 JAN 11 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Carlson JAN 12 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BOA HOLDINGS
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:

Amanda Diem
Name of Person

BOA HOLDINGS
Firm/Company

700 S. Harbour Isld. Blvd #509
Address

Tampa, FL 33602
City/State and Zip Code

amanda.diem@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amanda Diem at (813) 505-8646
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

10
FILED
10 JAN 11 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BOA HOLDINGS 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 1/4/10 and assigned
Florida document number L10000001126.

This amendment is submitted to amend the following:

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

N/A
The new name must be distinguishable and end with 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)

700 S. Harbour Island Blvd. #509
Tampa, FL 33602

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

700 S. Harbour Island Blvd #509
Tampa, FL 33602

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Barbara Borell	301 W. Platt St #229 Tampa, FL 33606	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Oleg Koltunov	301 W. Platt St #229 Tampa, FL 33606	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Oleg Koltunov	700 S. Harbour Isld. Blvd Unit 509 Tampa, FL 33602	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Amanda Diem	301 W. Platt St. #229 Tampa, FL 33606	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Amanda Diem	700 S. Harbour Isld Blvd Unit 509 Tampa, FL 33602	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Change business address to 700 S. Harbour Isld. Blvd #509
Tampa, FL 33602. Remove Barbara Borell. Change
address for Oleg Koltunov and Amanda
Diem to 700 S. Harbour Isld. Blvd #509 Tampa,
FL 33602.

Dated Jan. 5th 2010

Signature of a member or authorized representative of a member

Amanda Diem

Typed or printed name of signer

FILED
10 JAN 11 AM 9:08
CLERK OF STATE
TALLAHASSEE, FLORIDA