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#### COVER LETTER

TO:

Registration Section **Division of Corporations** 

Big Boy's Auto Transport 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:

## Chrysian Garcia

Name of Person

## Big Boy's Auto Transport LLC

Firm/Company

501 SW 56 Ave

Address

Margate FL 33068

City/State and Zip Code

chrysgarcia@aol.com

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

For further information concerning this matter, please call:

## Chrysian Garcia

at (954)213-5218

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

Big Boy's Auto Transport LLC				
( <u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our rec ited Liability Company)	ords.)		
The Articles of Organization for this Limited Liability Com	npany were filed on June 21, 201	0	and assi	igned
Florida document number L1000065564				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	l liability company here:			
RCG Capital Trust LLC				
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the desi			bbreviatio
Enter new principal offices address, if applicable:			2013 2013	
(Principal office address MUST BE A STREET ADDRES	<u></u>	AHASSE	 }** !**	<u> </u>
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			TO THE	
Enter new mailing address, if applicable:			<b>8</b> 2	
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	<u>ev</u>	
B. If amending the registered agent and/or registere	ed office address on our records	. enter the n	ame o	f the ne
registered agent and/or the new registered office addres		, <u> </u>		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida s	street address		
		orida		
	City	Zi	p 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 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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
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ated March 11  Signature of a member or authorized representative of a member	. If amending any other information	i, enter change(s) here: (Attach additional sheets, if necessary.)
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/ Lell #	March 11	2013
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Chrysian Garcia  Typed or printed name of signee	Chryslan Garcia	

Page 3 of 3

Filing Fee: \$25.00