

L10000107863

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

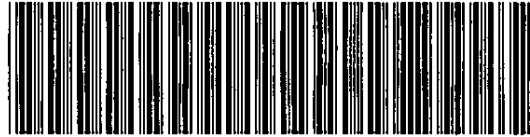
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/16/16--01003--014 **25.00

ALL FLORIDA

16 MAR 14 PM 2:08

MAR 14 2016

Y-SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 17, 2016

REGINALD GLOVER
4768 WOODVILLE HIGHWAY APT 832
TALLAHASSEE, FL 32305

SUBJECT: R & T TRANSPORT LLC
Ref. Number: L10000107863

We have received your document for R & T TRANSPORT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

Please return your document, along with 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.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 716A00003309

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: R&T Transport

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:

Reginald Glover

Name of Person

Firm/Company

4768 Woodville Highway Apt. 832

Address

Tallahassee, FL 32305

City/State and Zip Code

reggieglover3@gmail.com

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

For further information concerning this matter, please call:

Reginald Glover

850 5109080
at ()

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**

R&T Transport 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 10/15/2010 and assigned
Florida document number L10000107863.

This amendment is submitted to amend the following:

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

R&T Glover Transport 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:

(Principal office address MUST BE A STREET ADDRESS)

4768 Woodville Highway Apt. 832

Tallahassee, FL 32305

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:

Reginald Glover Jr.

New Registered Office Address:

15105 Buckhorn Ct Apt 302

Enter Florida street address

Lutz

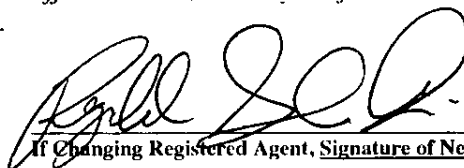
Florida 33559

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>
MGR	Thomeca Glover	643 Markim Rd	<input type="checkbox"/> Add
		Tallahassee, FL 32305	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Reginald Glover	4768 Woodville Highway Apt 832	<input type="checkbox"/> Add
		Tallahassee, FL 32305	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Ronald Glover	4768 Woodville Highway Apt 832	<input checked="" type="checkbox"/> Add
		Tallahassee, FL 32305	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

ALL REQUESTS
16 MAR 14 PM 3:08
FILED


16 MAR 14 PM 2:03
211 W. 10th St. L. 1000

16 MAR 14 PM 2:08
16 MAR 14 PM 2:08

(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.


Signature of a member or authorized representative of a member

Reginald Glover
Typed or printed name of signee