

LB000050903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

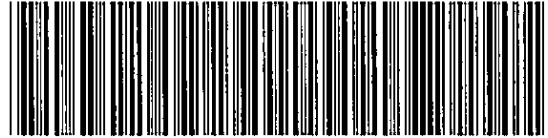
(Business Entity Name)

(Document Number)

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18 DEC -3 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K SAI ✓
DEC -7 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BOBA STATION FRANCHISE COMPANY, 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:

RAMON CASTILLO

Name of Person

Firm/Company

6815 BISCAYNE BLVD., STE 103-115

Address

MIAMI, FL 33138

City/State and Zip Code

ISORYSDILONE@GMAIL.COM

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

For further information concerning this matter, please call:

ISORYS DILONE

202 641-0924
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

BOBA STATION FRANCHISE COMPANY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
18 DEC -3 PM 1:07
HALL COUNTY CLERK
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04/08/2013 and assigned
Florida document number L13000050903.

This amendment is submitted to amend the following:

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

RELIEF LOGISTICS CONSULTANTS, 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:

333 N. FALKENBURG ROAD

(Principal office address MUST BE A STREET ADDRESS)

UNIT A-126

TAMPA FL, 33619

Enter new mailing address, if applicable:

333 N. FALKENBURG ROAD

(Mailing address MAY BE A POST OFFICE BOX)

UNIT A-126

TAMPA FL, 33619

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:

Ramon I Castillo

New Registered Office Address:

333 N. Falkenburg Road Unit A-126

Enter Florida street address

Tampa

City

Florida

33619

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.

Ramon I Castillo

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	James S. Malone		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
18 DEC -3 PM 1:08
SEAL
TALLAHASSEE, FLORIDA

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18 DEC -3 PM 1:08
TALLAHASSEE, FLORIDA

(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)

Filing Fee: \$25.00