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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Amend

MAY 2.9 2019 1 ALBRITTON

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	BC Lugistics Name of Limit	ted Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Britine	e Jernigan Name of Person	
	BC Log	iStics LLC Firm/Company	
	263	SW MUSKET	Place
	Britheeverr E-mail address: (1	City/State and Zip Code City/State and Zip Code	OM cation)
For further information co	ncerning this matter, please ca	dl:	
Britfiel Jer Name of	Mi gan Person	at (407) 415- Area Code Daytime	5735 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



May 18, 2019

BRITTNEE JERIGAN 263 SW MUSKET PLACE LAKE CITY, FL 32025

SUBJECT: BC LOGISTICS LLC Ref. Number: L19000108899

We have received your document for BC LOGISTICS 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):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document must have original signatures.

You failed to sign and print your name on the 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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 619A00010096

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	AMENDMENT
ARTICLES OF (ORGANIZATION Any as it now appears on our records.)
BC LOGSTICS (Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 19000 108899</u> .	y were filed on 64 22 12019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ility Company," the designation "L.L.C." 203 Sw Musket Place Lake City FL 32025
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	203 so musket place lake city to 32025
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	office address on our records, enter the name of the new
Name of New Registered Agent: Br	Hnee Jernigan
New Registered Office Address: 24	3 SW MUSKET PLUCE Enter Florida street address
	City, Florida 32025

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, Stenature 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 Title Name **Address** Type of Action MGR Britinee K. Jernigan 263 SW musket pl add Lake City FL 32025 ☐ Remove Change Britinee M. Jernigan 263 Sw musket pl DAdd MGR Lake city FL 32025 _□ Change □ Remove ☐ Change ☐ Remove □ Add ☐ Change ☐ Add ☐ Remove

□ Change

ii amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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_	
Note: II	e date, if other than the date of filing:
e reco The 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 0th day after the record is filed.
Dated	5/24/19 Britth M. Lorrigan Signature of a member or authorized representative of a member
	Brithel Molevniaan Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00