

L200000019750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

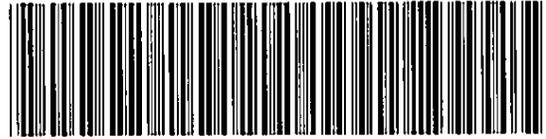
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Amend

MAR 07 2020
ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RELIANT TRANSPORT GROUP, 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:

HENOCK JEAN-FRANCOIS

Name of Person

RELIANT TRANSPORT GROUP, LLC

Firm Company

1317 EDGEWATER DRIVE,#325

Address

ORLANDO, FL 32804

City/State and Zip Code

reliant20@yahoo.com

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

For further information concerning this matter, please call:

Henock Jean-Francois

407 319-3621

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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>
AP	SAUVEUR,RUBENSON	1789 GRANDE POINTE BLVD, APT. 07-109	<input type="checkbox"/> Add
		ORLANDO, FL 32839	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SAUVEUR,RUBENSON	1789 GRANDE POINTE BLVD, APT. 07-109	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32839	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	JOSEPH,GABRIEL	1222 AMAZON LANE	<input type="checkbox"/> Add
		POINCIANA, FL 34759	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JOSEPH,GABRIEL	1222 AMAZAON LANE	<input checked="" type="checkbox"/> Add
		POINCIANA, FL 34759	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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