

L230000054976

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

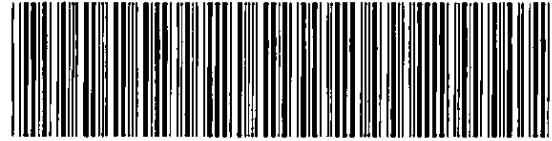
(Business Entity Name)

(Document Number)

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10/17/23--01038--015 \*\*25.00

2023 OCT 17 AM 7:40

10/21/23

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Pub G Boba 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:

Cong Liu

\_\_\_\_\_  
Name of Person

Pub G Boba LLC

\_\_\_\_\_  
Firm/Company

11358 S Orange Blossom Trail

\_\_\_\_\_  
Address

Orlando, FL 32837

\_\_\_\_\_  
City/State and Zip Code

ko9chinabar@gmail.com

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

For further information concerning this matter, please call:

Christina Lee

973

818-0176

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

September 20, 2023

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

Re: Pub G Boba LLC  
Document number: L23000054976  
FEIN: 92-2171013

Dear Madam/Sir,

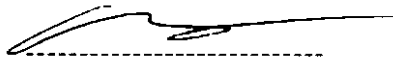
As per the above referenced taxpayer, we are requesting Amendment for ownership change enclosed the application of Articles of Amendment with the check \$25.

Please note the company would like to change ownership: The new general manger Lirong Chen will be added and the previous general manager Cong Liu will be removed effective immediately. All the other such as principal office address, mailing address and the registered agent keep same.

Based upon the above stated facts and circumstances, we respectfully request your records be adjusted accordingly. Thank you in advance for your consideration regarding this matter.

Should you have any questions, please do not hesitate to contact me at (718) 288-9997.

Sincerely,



Cong Liu, General Manager  
Pub G Boba LLC  
11358 S ORANGE BLOSSOM TRAIL, ORLANDO, FL 32837  
Cell (718) 288-9997  
Email: ko9chinabar@gmail.com

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

Pub G Boba LLC

2023 OCT 17 AM 7:40

(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 1/30/2023 and assigned  
Florida document number L23000054976.

This amendment is submitted to amend the following:

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

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)**

**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:

New Registered Office Address:

*Enter Florida street address*

Florida

*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          | Cong Liu    | 11358 S Orange Blossom Trail, Orlando, FL 32837 | <input type="checkbox"/> Add               |
|              |             |                                                 | <input checked="" type="checkbox"/> Remove |
|              |             |                                                 | <input type="checkbox"/> Change            |
| MGR          | Lirong Chen | 11358 S Orange Blossom Trail, Orlando, FL 32837 | <input checked="" type="checkbox"/> Add    |
|              |             |                                                 | <input type="checkbox"/> Remove            |
|              |             |                                                 | <input type="checkbox"/> Change            |
|              |             |                                                 | <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            |
|              |             |                                                 | <input type="checkbox"/> Add               |
|              |             |                                                 | <input type="checkbox"/> Remove            |
|              |             |                                                 | <input type="checkbox"/> Change            |

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slightly textured appearance and some minor blemishes or dust specks. The edges of the paper are slightly irregular.

(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

Typed or printed name of signee