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COVER LETTER

Division of Corporations		
Boba Station Plus, LLC SUBJECT:		
	led Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change	e and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to	the following:	
Tony C Butt		
Name of Person		
Boba Station Plus, LLC		
Firm/Company		
6 Candy Ln		
Address		
Syosset, NY 11791		
City/State and Zip Code		
bobaplusllc@gmail.com		
E-mail address: (to be used for future annual report	notification)	
For further information concerning this matter, please cal	t:	
Tony C Butt 516	330-5656	
Name of Person	Area Code & Daytime Telephone Number	
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	
Enclosed is a check for the following amount:		
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	me of the limited liability company: Boba Station Plus	, LLC	
2. (a)	18102 Hewlett Rd	(b) 6	Candy La
(w)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Orlando, F1. 32820		Syosset, NY 11791
	01/16/2024	1.24	4000032211
3. 5. (a)	Date of filing/registration in Florida Tony C Butt	4.	Document number
υ. (α)	Registered Agent and Registered Office shown on the records of 9380 Night Heron Ln	pt. of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	Naples FL	34120	
(b)	Tony C Butt		
	Enter name of NEW Registered Agent and/or NEW Registered	Office addres	
	18102 Hewlett Rd		
	NEW Registered Office Address:		
	Orlando F1	32820	
change agent v was/we the arti	imited liability company is not organized under the lay or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registered on bility comparts of the limited	office and the business office of the registered nany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obl to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address. If I muriting of this change.	ee to act in t performance I for in Chap pereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been
Signatu	re of Rogistered Agent		