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COVER LETTER

TO: Registrati Division o	on Section f Corporations
	Hansen, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articl	es of Amendment and fee(s) are submitted for filing.
Please return all cor	respondence concerning this matter to the following:
	Reid Hansen
	Name of Person
	PB/FP Pilot
	Firm/Company
	420 Anchorage Lane
	Address
	North Palm Beach, FL 33408
	City/State and Zip Code
	captainhansen@yahoo.com
	E-mail address: (to be used for future annual report notification)
For further informat	tion concerning this matter, please call:
Reid Hansen	561 3528091 at ()
N	ame of Person Area Code Daytime Telephone Number
Enclosed is a check	for the following amount:
□ \$25.00 Filing F	ee \$\begin{align*} \begin{align*} \b

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**

Reid Hansen, LLC			
(Name of the Lim	(A Florida Limited	pany as it now appears on our rec d Liability Company)	cords.)
The Articles of Organization for this Limited I lorida document number L05000077812	Liability Compan	ny were filed on Aug 8, 2005	and assigned
his amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited lia	bility company here:	
PB/FP Pilot, LLC			
he new name must be distinguishable and contain the	words "Limited Lial	bility Company," the designation "l	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	N/A	
Principal office address MUST BE A STRE	ET ADDRESS)		
Inter new mailing address, if applicable:		N/A	
• • • • • • • • • • • • • • • • • • • •	7 P.01 0		
<u>Mailing address MAY BE A POST OFFICE</u>	<u>: BUX)</u>	*** · · · · · · · · · · · · · · · · · ·	to and the contract of the con
3. If amending the registered agent and egistered agent and/or the new registered of	•		rds, enter the name of the
Name of New Registered Agent:	19/24		
	· · · · · · · · · · · · · · · · · · ·		
Name of New Registered Agent: New Registered Office Address:	N/A	Enter Florida street ad	dress
	· · · · · · · · · · · · · · · · · · ·		dress Florida

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.

			2017	
if Changing Registered Agent, Sign	ature o	(New Re	gistered	Agent
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Page 1 of 3		四名	σ	
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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>	Name	Address	Type of Action
N/A	N/A	N/A	🖸 Add
		N/A	□ Remove
		N/A	Change
			🗆 Add
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Filing Fee: \$25.00