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COVER LETTER

то:	Registration Se Division of Cor			
			DOCKING PILOTS, LLC	
SUBJ	ECT:	Name of Limit	ted Liability Company	
The e	nclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please	e return all correspo	ndence concerning this matter t	o the following:	
			Derik M. Flint	
			Name of Person	 .
		JACKSO	NVILLE DOCKING PILOTS, LLC	2
			Firm/Company	
		1334 Mayfair Rd.		
		 	Address	
		Jacksonville, FL, 3220	7(
		derik.flint@comcast.n	City/State and Zip Code	
		E-mail address: (to	o be used for future annual report notifi	cation)
For fu	irther information o	oncerning this matter, please ca	11:	
	Derik M	4. Flint	904 399-8807	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclo	sed is a check for th	ne 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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	gned
The Articles of Organization for this Limited Liability Company were filed on and assi L08000021108 This amendment is submitted to amend the following:	gned
This amendment is submitted to amend the following:	
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Te and the second secon	
A. If amending name, enter the new name of the limited liability company here:	
N/A	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.I	C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	1
	+12701
٠ (ن)	:
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
\$6	

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>	Address	Type of Action
MGR	Derik M. Flint	1334 Mayfair Rd.	
		Jacksonville, Fl. 32207	Remove
			☐ Change
MGR	John Roy Redman	5258 Clapboard Creek Drive	
		Jacksonville, Fl. 32226	□ Remove
			■ Change
MGR	Steven B. Harvey	2990 Sunset Landing Drive	■ Add
		Jacksonville, Fl. 32226	□ Remove
MGR	Danny Ray Still, II	6247 Riviera Manor Dr.	■ Add
		Jacksonville, FL, 32216	🗆 Remove
			Change
MGR	Robert L. Johnson, III	1786 Providence Hollow Lane	= Add
		Jacksonville, Fl., 32223	□ Remove
			□ Change
			Add
			⇔
			☐ Change

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		D:	ate of Filing			
		of filing:		filing or more than 9	(optional) I days after filing.) P	ursuant to 605.02
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