L100000 64752

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(Address)
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JUN 27 2018

COVER LETTER

то:	Registration Sec Division of Corp			
CUDU	PNC, LLC			
SUBJI	ECT:	Name of Limi	ted Liability Company	
The en	nclosed Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please	return all correspon	ndence concerning this matter t	to the following:	
		Christopher Scott		
			Name of Person	
		PNC, LLC		
			Firm/Company	·
		303 S Melville Avenue		
			Address	
		Tampa, FL 33606		
			City/State and Zip Code	
		lewis.mustard@gmail.con	n to be used for future annual report notif	ication)
		·		.curon)
For fu	rther information co	oncerning this matter, please ca	HI:	
Chris	topher Scott		813 734-5777 at ()	
	Name of	f Person	Area Code Daytime	e Telephone Number
Enclos	sed is a check for th	ne following amount:		
\$2	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

PNC, LLC				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L10000064352	were filed on 06/16/2010	and a	ssigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the al	hbreviation '	L.L.C."	-
Enter new principal offices address, if applicable:	303 S Melville Avenue			_
(Principal office address MUST BE A STREET ADDRESS)	Tampa, FL 33606	مر	<u>ب</u> ھ	-
			'-s	٠,
		r	5,5	-
Enter new mailing address, if applicable:		.	<u></u>	- `
(Mailing address MAY BE A POST OFFICE BOX)	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) zation for this Limited Liability Company were filed on 06/16/2010 and assigned ber L10000064352 pointited to amend the following: e. enter the new name of the limited liability company here: inquishable and contain the words "Limited Liability Company" the designation "LLC" or the abbreviation "LLC" of the abbreviation "LLC" and assigned ber 2003 S Melville Avenue Tampa, FL 33606 Tampa, FL 33606 Tregistered agent and/or registered office address on our records, enter the name of the new or the new registered office address here: The Registered Agent: The Registered Agent: The Registered Agent: The Registered Address: The Florida street address The Florida Florida Florida Florida Florida			
			9	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, <u>enter</u> <u>e</u> :	the nam	e of the	new
Name of New Registered Agent:				-
New Registered Office Address:	Enter Florida street address			-
			<u></u>	_
	City	Zip Сос	te	

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>	Address	Type of Action
MGR	Thomas Ortiz	303 S Melville Ave	Add
		Tampa, FL 33606	☐ Remove
			☐ Change
			
		<u></u>	Remove
			Change
		 	□ Add
			□ Remove
			Change
			Add
			□ Remove
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			Remove
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			□ Remove
			☐ Change

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E. Effective da	date is listed, th	e date must b	e specific	ling: and canno	18/2018	to date of fi	ling or more	than 90 day	(optional	g.) Pursuant	to 605.	020 d a
Note: If the document's	date inserted effective date	on the Dep	k does no artment o	of State's	records.	ibie statute	ory tiling r	equirement	s, uns dai	e will flot	oe nste	u a
If the record (b) The 90tl	n day after	the recor	d is file	ed.							earlie	r c
	[0/2018	·/									
Dated	- 4/2	0 1 2 - 10										
Dated	- 4/2	(

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Filing Fee: \$25.00