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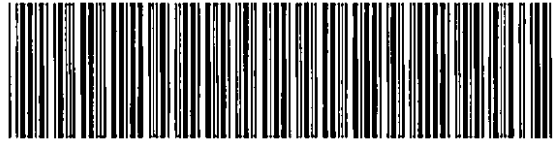
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Patti Hancock 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:

Patricia A Hancock  
Name of Person

Firm/Company

5003 SE Post Terrace  
Address

Stuart, FL 34997  
City/State and Zip Code

patgo772@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patricia Hancock at 72 215-7270  
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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Patti Hancock LLC

The Articles of Organization for this Limited Liability Company were filed on 6-25-2013 and assigned Florida document number L13000090940.

Patricia A Hancock LLC

Page 1 of 3

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>
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Dated \_\_\_\_\_

Signature of a member or authorized representative of a member

Typed or printed name of signee