

8/10/2017

Division of Corporations

H17000167095
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H17000212024 3)))



H170002120243ABCT

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PIONEER MANAGMENT LLC**

Certificate of Status	0
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Page Count	04
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Electronic Filing Menu

Corporate Filing Menu

Help

D. BRUCE
AUG 11 2017

Fax Audit H17000210024 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Pioneer Management LLC

(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 8/4/2017 and assigned
Florida document number L17000167095

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the Limited Liability company here:

Pioneer Management LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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2017 AUG 10 AM 01
TALLAHASSEE FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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 this limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Fax Audit H17000210024 3

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	TIA LAWSON	1311 CINDER LANE	☒ Add
		KISSIMMEE, FL 34744	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☒ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

CLERK OF DISTRICT COURT
JULIA J. ASSI
2017-08-10 10:50:45

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Fax Audit H1700021024 3

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)
 (If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated 28 AUGUST 2017

C. Lawson
 Signature of a member or authorized representative of a member

Casey Lawson, Member

Typed or printed name of signer

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