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18/2/18 DS



September 12, 2018

ADVANCED INCORPORATING SERVICE, INC.

SUBJECT: PENSACK CAPITAL, LLC

Ref. Number: L18000209428

We have received your document for PENSACK CAPITAL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Name unavailable, conflict document number is P16000051747.

Corrected feath feath

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 718A00018923

www.sunbiz.org

Advanced Incorporating Service, Inc.

1317 California Street P.O. Box 20396 Tallahassee, FL 32316 Phone: 850-222-CORP Fax: 850-575-2724 Email: orders@aisincfl.com Website: www.aisincfl.com

Pensack Capital, L.C	
FOR O	FFICE USE ONLY
PICK ONE:	
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Country	
Amount of Documents	
DATE 9/1/18 TIME	
Notes:	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pensack Capital, 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 8/31/2018	and assigned
lorida document number L18000209428	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability company here:	
Premier Capital, LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LI C" or the	abbreviation "L.L.C.
Enter new principal offices address, if applicable:	
after 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)	
B. If amending the registered agent and/or registered office address on our records, ente	r the name of the
registered agent and/or the new registered office address here:	. 1
	:
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	·
Placida	;
Cuv.	Zir 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 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 = -N \\ AMBR = A $	lanager athorized Member		
Title	<u>Name</u>	Address	Type of Action
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ote: If the date in	other than the date of filit isted, the date must be specific a iserted in this block does not	meet the applicable	ate of filing or more the statutory filing requ	(optional) in 90 days after filing.) P airements, this date w	firsuant to 605 020 Îl not be listed a
ocument's effectiv	e date on the Department of	State's records.			
e record specif The 90th day	ies a delayed effective after the record is filed	date, but not a	n effective time,	at 12:01 a.m. or	the earlier o
September	9	2018			
, <u>.</u>	Aignature of	a member or authorize	d representative of a r	nember	
Brian P	ensack				
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Page 3 of 3

Filing Fee: \$25.00