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COVER LETTER

TO: Registratio Division of	n Section Corporations		
are reco		EXPRESS, LLC	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Article	s of Amendment and fee(s) are sub	omitted for filing.	
Please return all corr	espondence concerning this matter	to the following:	
		DORIN PATIC	
		Name of Person	
		PILOT EXPRESS, LLC	
		Firm/Company	
		5312 FOX RUN ROAD	
		Address	
		SARASOTA, FL 34231	
		City/State and Zip Code	<u> </u>
		OTEXPRESS2019@GMAIL.COM	
	E-mail address: (to be used for future annual report notif	fication)
For further informati	on concerning this matter, please of	all:	
DORIN PATIC		+1 702-969-695 at ()	2
DORIN PATIC +1 702-969-6952 at () Name of Person Area Code Daytime Telephone Number		e Telephone Number	
Enclosed is a check t	or the following amount:		
■ \$25.00 Filing Fe	e S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Cl \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Division of P.O. Box	on Section of Corporations	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL	porations fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	PILOT EXPRESS, LLC		
(Name of the Lim	ted Liability Company as it now appear (A Florida Limited Liability Company)	rs on our records,)	 _
The Articles of Organization for this Limited L Florida document number		March 27th, 2019	and assigned
This amendment is submitted to amend the fol			
A. If amending name, enter the new name of	of the limited liability company he	ere:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the d	lesignation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if appli	cable:		· 22
Principal office address MUST BE A STREE	ET ADDRESS)		- BUG
Enter new mailing address, if applicable:			2 PK
Mailing address MAY BE A POST OFFICE	<u>BOX</u>)		3: 3: · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or agent and/or the new registered office addre		ecords, <u>enter the name</u>	of the new register
Name of New Registered Agent:	DORIN PATIC	·	
New Registered Office Address:	5312 FOX RUN ROAD		
	Enter Flo	rida street address	
	SARASOTA	, Florida	34231
	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 the limited liability company has been notified in writing of this change.

DORIN PATIC

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
AMBR	ANATOLIE PATIC	5312 FOX RUN ROAD, SARASOTA, FL 34231	≣ Ad d
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			□Change
			□Add
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tive date, if other than th Rective date is listed, the date m	ust be specific and cannot be prior	to date of filing or more	than 90 days after filing.)	Pursuant to 60:
If the date inserted in this b	block does not meet the application. Department of State's records.	able statutory filing re	equirements, this date v	vill not be list
nem sencenve date on the i	Department of State 3 records.			
ed enacities a delever affecti	ive date, but not an effective ti	me at 12:01 a.m. on t	the earlier of (b). The	90th day afti
iled.	ive date, but not an effective to	me, at 12.01 a.m. on	ine carrier on (o)	your day and
July 30th	2021	·		
	Signature of a member or author	DORIN PATIC		