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(City/State/Zip/Phone #)

☐ PICK-UP

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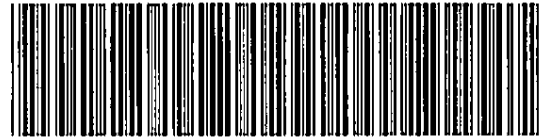
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Pigzza 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:

Thomas H Ward

Name of Person

PF SYNDICATION I L.L.C.

Firm/Company

1309 WILFRED DRIVE

Address

ORLANDO, FL 32803

City/State and Zip Code

thomas@pigfloyds.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas H Ward                      407              921-1696  
at (              )  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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>	<u>Address</u>	<u>Type of Action</u>
MGR	Thomas H Ward	1309 WILFRED DRIVE	<input type="checkbox"/> Add
		ORLANDO, FLORIDA 32803	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PF SYNDICATION I L L C.	1309 WILFRED DRIVE	<input checked="" type="checkbox"/> Add
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1. What is the main purpose of the document?  
 2. What are the key findings of the study?  
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

  
Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**