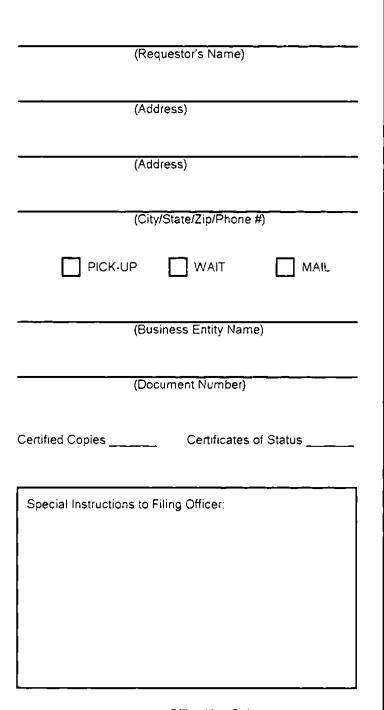
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Office Use Only



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## **COVER LETTER**

TO: Registration S Division of Co			
Stevenson	Freight and Delivery Service		
SUBJECT:	Name of Lin	nited Liability Company	
The e closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Craig Stevenson		
		Name of Person	
	Stevenson Freight and De	livery Service	
		Firm/Company	
	400 Goodlette Road, # 117	29	
		Address	
	Naples, Florida 34102		
	50050 11	City/State and Zip Code	
	sirccer5995@gmail.com E-mail address:	to be used for future annual report noti	fication)
For further information of	concerning this matter, please o	all:	
Craig Stevenson	239 206-6357 at ( )		
Name o	of Person	<del></del> \ <del></del> /	e Telephone Number
Enclosed is a check for t	he 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

# TO ARTICLES OF ORGANIZATION OF

Stevenson Freight and Delivery Service (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 April 8, 2021 and assigned Florida document number L210000241492 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Pione er Redevelopment LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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) ijŢ 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

#### 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 will 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 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 adder removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
<del></del>			□Add
			Remove
			□Change
			□Remove
			□Change
			□Remove
			□Change

## Page 2 of 3

3) Proper tax provisions.  4) Creditor can not force a distribution.  5) Restrictions on transfer of ownership.  6) Creditor can not force removal of a manager.  7) Decanting provision.  8) Non pro-rata distribution clause.  9) Appointment.  9) Appointment.  effective date, if other than the date of filing: (optional)	2) Ability to engage in comp	petetive ventures.
5) Restrictions on transfer of ownership. 6) Creditor can not force removal of a manager. 7) Decanting provision. 8) Non pro-rata distribution clause. 9) Appointment.  **Cetive date, if other than the date of filing:  ———————————————————————————————————	3) Proper tax provisions.	
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8) Non pro-rata distribution clause.  9) Appointment.  **Cective date, if other than the date of filing:	6) Creditor can not force ren	noval of a manager.
9) Appointment.  **Cective date, if other than the date of filing:	7) Decanting provision.	
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