

MI70000004886

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

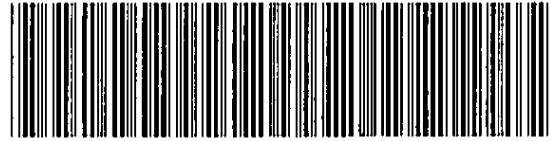
(Document Number)

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Certificates of Status \_\_\_\_\_

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FILED  
2023 OCT 17 PM 12:45  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Pirate Ship, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lauren Owenby

Name of Person

Firm/Company

430 Cardinal Ave.

Address

Fort Walton Beach, FL 32548

City/State and Zip Code

lhedenschoug@hotmail.com

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

For further information concerning this matter, please call:

Lauren Owenby

Name of Person

at ( 815 ) 953-3607

Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of State: Pirate Ship, LLC

Enter new principal office address, if applicable:

(Principal office address  
MUST BE A STREET ADDRESS)

200 W. 34TH AVE., #977

ANCHORAGE, AK 99503

Enter new mailing address, if applicable:

(Mailing address  
MAY BE A POST OFFICE BOX)

430 CARDINAL AVE.

FORT WALTON BEACH, FL 32548

2. The Florida document number of this limited liability company is: M17000004886

3. Jurisdiction of its organization: Alaska

4. Date authorized to do business in Florida: 10/22/2018

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: \_\_\_\_\_  
(must contain "Limited Liability Company," "L.L.C.," or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC")

6. If amending the registered agent and/or registered officer 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 the limited liability company has been notified in writing of this change.*

\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE, FLORIDA

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

\_\_\_\_\_

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

\_\_\_\_\_

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
------------------------	-------------	----------------	-----------------------

MBR	Lauren Hedenschoug	430 CARDINAL AVE.	<input type="checkbox"/> Add
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		FORT WALTON BEACH, FL 32548	<input checked="" type="checkbox"/> Remove
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MBR	Lauren Owenby	430 CARDINAL AVE.	<input checked="" type="checkbox"/> Add
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		FORT WALTON BEACH, FL 32548	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove
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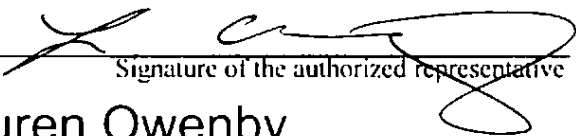
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		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
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9. Attached is a certificate, if required: no more than 90 days old, evidencing the  
aforementioned amendment(s), duly authenticated by the official having custody of records in  
jurisdiction under the law of which this entity is organized.

  
\_\_\_\_\_  
Signature of the authorized representative  
Lauren Owenby  
\_\_\_\_\_  
Typed or printed name of signee

FILED  
2023 OCT 17 PM 12:45  
TALLAHASSEE, FLORIDA

THE STATE  
of **ALASKA**Department of Commerce, Community and Economic Development  
Division of Corporations, Business and Professional Licensing**Corporations Section**State Office Building, 333 Willoughby Avenue, 9<sup>th</sup> Fl

PO Box 110806, Juneau, AK 99811-0806

Phone: (907) 465-2550 • Fax: (907) 465-2974

Email: [corporations@alaska.gov](mailto:corporations@alaska.gov)Website: [Corporations.Alaska.Gov](http://Corporations.Alaska.Gov)

\* 1 0 0 5 7 7 6 2 9 \*

**COR**

FOR DIVISION USE ONLY

**RECEIVED**

AUG 14 2023

CBPL  
JUNEAU

CC 25 NR

**RECEIVED**

Juneau

OCT 04, 2023

CBPL

**Notice of Change of Officials****Domestic Limited Liability Company (AS 10.50)**

- This Notice of Change of Officials form is only for Domestic Limited Liability Companies and is used to report changes between biennial reporting periods in: members, managers, and percentage of interest held.
- This Notice of Change of Officials will not be filed if the entity's biennial report is not current. To verify the entity's biennial report due date, go online to [www.Corporations.Alaska.Gov](http://www.Corporations.Alaska.Gov) and select *Search Corporations Database*
- Standard processing time for complete and correct filings submitted to this office is approximately 10-15 business days. All filings are reviewed in the date order they are received.
- The information you submit is a public record and will be posted on the State's website.

**1. Important:**

AS 10.50.765

Each Domestic Limited Liability Company is required to notify this office when there is a change of officials.

— AS 10.50.765

Failure to meet this requirement may result in involuntary dissolution of the entity's authority to transact business in the State of Alaska.

The Domestic Limited Liability Company is to keep and make available the records of the official(s) changes.

— AS 10.50.860-.870

**2. Fee:**☒ \$25 Nonrefundable Filing Fee (CORF)

3 AAC 16.065(b)

Mail this form and the non-refundable \$25 filing fee in U.S. dollars to the letterhead address. Make the check or money order payable to the State of Alaska or use the attached credit card payment form.

**3. Entity Information:**

AS 10.50.765

Entity Name: Pirate Ship, LLCAlaska Entity Number: 10059292

K 4 0 6 9 4 0 3

**4. REMOVE from Record:**

AS 10.50.765(b)

The following officials (members and, if applicable, managers) will be completely removed from the record as a result of this filing:

Name: Lauren Hedenschoug

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

If an official is not being removed from record, then list them in Item #5 below (with their current information).

**RECEIVED**

AUG 14 2023

CBPL

JUNE 10

**5. ALL Current Officials:**

AS 10.50.765(b)

The following is a complete list of ALL remaining and new officials who will be on record as a result of this filing.

- An LLC must have at least one member who owns a % of the LLC. — AS 10.50.155(b)
- Must provide all members who own 5% or more of the LLC. — AS 10.50.765 (b)
- Members must own a % of the LLC. A member may be a manager if the LLC is manager managed.
- An LLC may be managed by a manager if provided in Articles of Organization. A manager may be a member if the manager also owns a % of the LLC. — AS 10.50.075(5) and AS 10.50.110(b)

- List ALL officials and their current information to be on record.
- Manager will only be accepted if the entity is manager-managed per the articles.
- BOLD fields are required.

FULL LEGAL NAME	COMPLETE MAILING ADDRESS	% OWNED	MEMBER Manager
Lauren Owenby	430 Cardinal Ave., Fort Walton Beach, FL 32548	99%	<input checked="" type="checkbox"/>

→ If necessary, use the following supplement page and include all information required above in Item #5.

**6. Required Signature:**

AS 10.50.840

The Notice of Change of Officials must be signed by: a member (AS 10.50.840(a)(2)); or a manager if manager managed (AS 10.50.840(a)(1)); or an attorney-in-fact (AS 10.50.840(c)). Persons who sign documents filed with the commissioner that are known to the person to be false in material respects are guilty of a class A misdemeanor.

Signature: \_\_\_\_\_

Date: 8/14/2023Printed Name: Scott Anderson

Title of Authorized Signer:

☐ Member☐ Manager☒ Attorney-in-fact

If signing on behalf of a member or manager which is an entity, then identify the signer's relationship and signing authority with the member entity. For example: John Smith, President of XYZ Inc. the sole member of ABC LLC.



THE STATE  
of **ALASKA**

Department of Commerce, Community, and Economic Development  
Division of Corporations, Business, and Professional Licensing  
PO Box 110806, Juneau, AK 99811-0806  
(907) 465-2550 • Email: [corporations@alaska.gov](mailto:corporations@alaska.gov)  
Website: [corporations.alaska.gov](http://corporations.alaska.gov)

**COR**

**Domestic Limited Liability Company**

**2023 Biennial Report**

For the period ending December 31, 2022



**Due Date:** This report along with its fees are due by January 2, 2023

**Fees:** If postmarked before February 2, 2023, the fee is \$100.00.

If postmarked on or after February 2, 2023 then this report is delinquent and the fee is \$137.50.

**Entity Name:** Pirate Ship, LLC

**Entity Number:** 10059292

**Home Country:** UNITED STATES

**Home State/Prov.:** ALASKA

**Registered Agent** information cannot be changed on this form. Per Alaska Statutes, to update or change the Registered Agent information this entity must submit the Statement of Change form for this entity type along with its filing fee.

**Name:** LMRA Services, Inc.

**Physical Address:** 505 OLD STEESE HWY STE 122,  
FAIRBANKS, AK 99701

**Mailing Address:** 200 WEST 34TH AVE BOX 977,  
ANCHORAGE, AK 99503

**Entity Physical Address:** 505 OLD STEESE HWY STE 122, FAIRBANKS, AK 99701

**Entity Mailing Address:** 200 WEST 34TH AVE BOX 977, ANCHORAGE, AK 99503

**Officials:** The following is a complete list of officials who will be on record as a result of this filing.

- **Provide all officials and required information. Use only the titles provided.**
- **Mandatory Members:** this entity must have at least one (1) Member. A Member must own a %. In addition, this entity must provide all Members who own 5% or more of the entity. A Member may be an individual or another entity.
- **Manager:** If the entity is manager managed (per its articles or amendment) then there must be at least (1) Manager provided. A Manager may be a Member if the Manager also owns a % of the entity.

Full Legal Name	Complete Mailing Address	% Owned	Member
Lauren Hedenschoug	430 Cardinal Ave., Fort Walton Beach, FL 32548	99%	✓

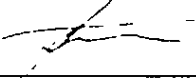
If necessary, attach a list of additional officers on a separate 8.5 X 11 sheet of paper.

**Purpose:** Create, Grow, and Maintain wealth through any and all legal means.

**NAICS Code:** 551114-CORPORATE, SUBSIDIARY, AND REGIONAL MANAGING OFFICES

**New NAICS Code (optional):**

**Signature:** This form is for use by the named entity only. Only persons who are authorized by the Official(s) of the named entity may make changes to it. If you proceed to make changes to this form or any information on it, you will be certifying under penalty of perjury that you are authorized to make those changes, and that everything on the form is true and correct. In addition, persons who file documents with the commissioner that are known to the person to be false in material respects are guilty of a class A misdemeanor. By signing you acknowledge you have read this and understand it.

Signature  Print Name Scott Anderson, Attorney-In-Fact Date 9/14/2023