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SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

COVER LETTER

SUBJECT:	BDR LOGIC, L.L.C.	
	Name of Limited Liability Company	
e enclosed Articles	of Amendment and fee(s) are submitted for filing.	
ase return all corre	spondence concerning this matter to the following:	
	George L. Gober (registered agent)	
	Name of Person	
	George L. Gober & Company	
	Firm/Company	
	8441 W Commercial Blvd	
	Address	
	Tamarac, FL 33351	
	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification) [A. D. D. G. M. D.	
3rent D. F	Robinson (MGRM) at (954) 643-4439	
Nam	ne 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 6327th (p.32-150)
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2012 DEC 21 PN 3: 26

SECRETARY OF STATE TALLAHASSEE, FLORIDA

BDR LOGIC, L.L.		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on November 7, 2012	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	9900 W Sample Road, Suite 3	800
(Principal office address MUST BE A STREET ADDRESS)	Coral Springs, FL 33065	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	same as new principal addre	SS
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ne name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addı	ress
	. Florida	
	City , Florida	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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> **Name Address Type of Action** ----NO CHANGES TO MEMBERS -Remove Remove Remove Remove

· · · · · · · · · · · · · · · · · · ·	, enter change(s) here: (Attach additional sheets, if necessary.
	· · · · · · · · · · · · · · · · · · ·
December 19	2012
~	
Signatur	e of a member or authorized representative of a member
-	RENT D. ROBINSON
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

