# 0500102692

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ĉi	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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AMENDMENT 7 COVER LETTER	
TO: Registration Section Division of Corporations	
SUBJECT: LOGOS TITLE LC  (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:	
PATRICK J. HALPIN, ESQ. (Name of Person)	
LOGON TITLE LLC (Firm/Company)	
8801 DR. MARTÍN LUTHER KING JR. STREET NORTH	1
ST. PETERSBURG FLORIDA 33 2002. (City/State and Z/p Code)	
For further information concerning this matter, please call:	
(Name of Person)  (Name of Person)  (Area Code & Daytime Telephone Number)	
(Maine of Follows)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee \$ \$55.00 Filing Fee \$ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	

## **MAILING ADDRESS:**

Registration Section Division of Corporations P.O. Box 6327 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

(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 10/18/05 and assigned Florida document number 605000/02692.
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" of the abbutiation "L.L.C."  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:  New Registered Office Address:  Sol M. MARTIN LUTHER KING TR. STREET NORTH  (Enter Florida street address)  T. PETERSBURG , 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 Changing Registered Agent, Signature of New Registered Agent)

MGR = Ma MGRM = M	nager Managing Member	<b>;</b>	
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
16RM	ANDREW L.	FIVECONT 4663 NEPTUNE ST. PETERSONE,	Add Add Remove
			Add Remove
	<del></del>		Add Remove
			Add Remarks
	<del></del>		Promove H
			Add Remove
D. If amend	ding any other information	, enter change(s) here: (Attach additional shee	ts, if necessary.)
	No.		· ·
Dated	yry 5 Pat	nat Land Eg re of a member or authorized representative of a mem	L. MORN

Page 2 of 2

Filing Fee: \$25.00