L00000015577

(Requestor's Name)				
(Address)				
(Addı	ress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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SEPRETARY OF STATE
SEPRETARY OF STATE



J. BRYAN

AUG 1 0 2009

EXAMINER

COVER LETTER

; :OT	Registration Se Division of Cor				
SUBJE	CCT:	Logan Equ	ity Partners, LLC		
Name of Limited Liability Company					
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		Seth Weinstein Name of Person		ES SE TI	
Loç		Log	an Equity Partners, LLC		記器に
		Firm/Company		一种企业	
7000 W.		Palmetto Park Rd., Suite	409	PH II 21	
	Boca Raton, FL 33433 City/State and Zip Code				
		SWeil E-mail address: (nstein@loganequity.com to be used for future annual report no	tification)	
For fu	ther information	concerning this matter, please of	call:		
		eth Weinstein	at (561) Area Code & Dayt	750-8878	r
	ed is a check for t	the following amount: \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclos	sed) Certifie	ate of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations Center Circle		



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 31, 2009

SETH WEINSTEIN LOGAN EQUITY PARTNERS, LLC 7000 W. PALMETTO PARK RD., SUITE 409 BOCA RATON, FL 33433

SUBJECT: LOGAN EQUITY PARTNERS, LLC

Ref. Number: L06000015577

We have received your document for LOGAN EQUITY PARTNERS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 109A00026295

ARTICLES OF AMENDMENT 'TO' ARTICLES OF ORGANIZATION OF

SECRETARY OF FLOW	
2.	

Logan Eq	uity Partners, LLC	To the	
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on mited Liability Company)	our records.)	
	~. · · · · /:	3/200 6 and assigned	
The Articles of Organization for this Limited Liability Co	•	and assigned	
Florida document number <u>L060000 15577</u>	_•	·	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company here:		
The new name must be distinguishable and end with the word "L.L.C."	ls "Limited Liability Company,"	the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRI	<u>ESS)</u>		
	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	<u> </u>		
B. If amending the registered agent and/or register	ered office address on our	records, enter the name of the new	
registered agent and/or the new registered office addr			
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 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

If mending 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 Title <u>Name</u> <u>Address</u> Type of Action **MGRM** Scott Blick 6164 NW 32nd Avenue Boca Raton, FL 33496 ✓ Add Remove ☐ Add Remove ☐ Add Remove Remove Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated_

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signed

a member or authorized representative of a member