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EXAMINER

COVER LETTER

	TO: Registration Section Division of Corporations	
	SUBJECT: LOGAN MARTIN LLC (Name of Limited Liability Company)	
	Dear Sir or Madam:	
	The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	
	Please return all correspondence concerning this matter to the following:	
Stephen J. Bedosky (Name of Person)		
	(Firm/Company)	
	343 Old Dirt Road (Address) Tallahassee, FL 32317	
	Tallahassee, FL 32317 (City/State and Zip Code)	
	(City/State and Zip Code) For further information concerning this matter, please call:	
4	Stephen J. Bedosky at (850) 508-5313 (Name of Person) (Area Code & Daytime Telephone Number)	
	STREET/COURIER ADDRESS: Registration Section MAILING ADDRESS: Registration Section	

Clifton Building 2661 Executive Center Circle

Tallahassee, Florida 32301

Division of Corporations

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

Enclosed is a check for the following amount:

\$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508 company submits the following statement in order to changin the State of Florida.	
1. Name of the limited liability company: Logan	Martin LLC
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	242 014 $0.7+124$
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	same as above
3/22/07	L0700031170
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
8	ited States Corporation Agents Fr
Registered Office Address:	3302 Winding Oaks Blvd Suite A-100 TAMPA FL 33612-3425
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> : NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	V Registered Office address: Stephen J. Bedosky 343 Old Dirt Road
MICEL BE I BOXID/I STREET MODRESS/	Tallahassee, FL 32317
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cahereby confirmed that the change(s) was/were authorized bliability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member) STEPHEN J. BEDOSKY	aws of the State of Florida, it is hereby confirmed address of the registered office and the business use of a Florida limited liability company is y an affirmative vote of the members of the limited organization or the operating agreement of the
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

(Signature of Registered Agent)