08000003442

(Requestor's Name)	
(Address)	м
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	ıs
Special Instructions to Filing Officer:	
L. SELLERS	
MAY 2 8 2010	

EXAMINER

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section Division of Corporations			
•			
SUBJECT: Log	ology, LLC		
	l 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 m	atter to the following:		
Mary Priolo Name of Person	<u> </u>		
Name of Person			
BOTH USA, LLC			
Firm/Company			
270 First Avenue South Suite 205			
270 First Avenue South, Suite 305			
Addives			
St. Petersburg, FL 33701			
City/State and Zip Code			
mary.priolo@both-usa.com E-mail address: (to be used for future annual report notification	on)		
For further information concerning this matter, please call:			
Mary Priolo at (727) 825-3959		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations			
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301			
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, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:	Logiology, LLC	
2. (a) Principal office address of limited liability company	: Logiology, LLC	
(Note: MUST BE STREET ADDRESS)	270 First Avenue South, Suite 396 St. Petersburg, FL 33701	
(b) Mailing address of limited liability company:	Logiology, LLC	
(Note: MAY BE POST OFFICE BOX)	270 First Avenue South, Suite 396 St. Petersburg, FL 33701	
June 30, 2008	L08000063442	
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:	
Registered Agent:	Fowler White Boggs Banka P.A.	
Registered Office Address:	c/o Olga M. Pina 501 E Kennedy Blvd, Suite 1700 Tampa, FL 33602	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :		
NEW Registered Agent:	BOTH USA, LLC	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Attn: Mary Priolo 270 First Avenue South, Suite 305 St. Petersburg ,FL33701	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.		
Michelle Mauch Printed or typed name of signee		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	ngree to act in this capacity. If wither agree to oper and complete performance of my duties, sition as registered agent as provided for increasy reflect a change in the registered office y has been notified in writing of this change.	
Signature of Registered Agent		
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00		

INHS18 (05/08)