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09/16/09--01008--004 **25.00



D. BRUCE
SEP 17 2009
EXAMINER

COVER LETTER 15 TO: **Registration Section Division of Corporations** 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: Firm/Company City/State and Zip Code For further information concerning this matter, please call:

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee & Certificate of Status

S55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

S60.00 Filing Fee,
Certificate of Status &
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 (A Florida	Y Company as it now appears on or Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liability C		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim LOGAN GN VIV The new name must be distinguishable and end with the wo 'L.L.C."	onmental LLC	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	A _{CO}
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office add		SEP 16 PM 1:58 cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Flo	orida 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 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 **Title** Name **Address** Type of Action ☐ Add Remove ☐ Add Remove Remove □Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00