

**# L11000060087**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

05/23/12--01009--002    \*\*25.00

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
FILED

K. SALLY  
EXAMINER  
MAY 24, 2012

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Mokologic Online Marketing, LLC  
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:

Matthew Balthis

Name of Person

Mokologic Online Marketing, LLC

Firm/Company

7443 Roxye Ln

Address

Sarasota, FL 34240

City/State and Zip Code

matt@mokologic.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Balthis

Name of Person

at ( 321 )

262-1508

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &  
Certificate of Status

\$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

\$60.00 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**

FILED  
12 MAY 23 PM 12:14  
S.) SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Mokologic Online Marketing, LLC

**(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 05/23/2011 and assigned Florida document number L11000060087.

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" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

416 S Washington Blvd

Sarasota, FL 34236

**Enter new mailing address, if applicable:**

416 S Washington Blvd

Sarasota, FL 34236

**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:**

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**New Registered Office Address:**

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*Enter Florida street 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 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**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Williams, Travis C	7443 Roxye Ln Sarasota, FL 34240	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Locklear, Michael S	225 N Shade Ave Sarasota, FL 34237	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

Dated May 20, 2012.

  
Signature of a member or authorized representative of a member

Matthew Balthis  
Typed or printed name of signee