## 2/2000049125

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					

Special Instructions to Filing Officer:

A. LUNT

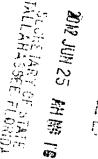
JUN 28 2011

**EXAMINER** 

Office Use Only



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06:25/12-01020-001

## **COVER LETTER**

	DEDA	10000110		
SUBJECT:		PERA LOGIC LLC  Name of Limited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	≥. <b>8</b>	
Please return all correspondence concerning this matter to the following:		MIN MINE SAILS		
	1	IMOTHY STEWART	Sac. 25	
		Name of Person		
		PERA LOGIC LLC		
		Firm/Company	•	
		Address		
	SAINT	PETERSBURG, FL 33701		
		City/State and Zip Code		
	ADM E-mail address: (	IIN@PERALOGIC.COM to be used for future annual report notification	on)	
For further information	concerning this matter, please of			
TIMO	THY STEWART	at ( )	0-7372	
Name	of Person	Area Code & Daytime Te	lephone 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	LING ADDRESS: tration Section	STREET/COURIER Registration Section	ADDRESS:	
Division of Corporations		Division of Corporatio Clifton Building	ns	
P.O. Box 6327 Tallahassee, FL 32314		· 2661 Executive Center Tallahassee, FL 32301		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PERA LOGIC LLC

(Name of the Limited I	dability Company as it now appears ( Florida Limited Liability Company)	on our records.)		_
The Articles of Organization for this Limited Lia	bility Company were filed on	04/11/2012	and	l assigned
Florida document number L120000491	125			
This amendment is submitted to amend the follow	ving:		in the Da	) (printers.
A. If amending name, enter the new name of t	the limited liability company here:			
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company	," the designation	"LLC" of	the abbreviation
Enter new principal offices address, if applical	ble:			
(Principal office address MUST BE A STREET	ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>			
B. If amending the registered agent and/or registered agent and/or the new registered offi		r records, <u>ente</u>	r the nar	ne of the new
Name of New Registered Agent:	PEGGY CONGER			· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	200 2ND AVE S #130			
	Enter	r Florida street d	address	
	SAINT PETERSBURG	, Florida	3	3701
	City		Zin	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.

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 **Address** Type of Action **Title** Name MGRM PEGGY CONGER 200 2ND AVE S #130 ₩ Add SAINT PETERSBURG, FL 33701 Remove ☐ Remove ☐ Add Remove ☐ Add Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) June 19th 2012 Dated \_\_\_\_\_ Signature of a member or authorized representative of a member TIMOTHY STEWART Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00