112000/15503

(Re	questor's Name)	
(Ad	dress)	
——————————————————————————————————————	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJI	THE LOGO	DNOM LLC		
-		Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		KENNY ARNOLD		
			Name of Person	
		THE LOGONOM LLC		
			Firm/Company	
		12938 MALLORY CIRC	LE APT 206	
		 	Address	
		ORLANDO FL 32828		
		KENNY@THELOGONOI	City/State and Zip Code M.COM	
		E-mail address: (to be used for future annual report notifi	cation)
For fur	ther information c	oncerning this matter, please co	all:	
KENN	IY ARNOLD		407 761-8063	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
\$2	5.00 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

THE LOGONOM LLC

(Name of the Limiter	<u>i Liability Compar</u> A Florida Limited I	<u>ny as it now appears on our 1</u> Jability Company)	records,	E S:	<u></u>
(*	11701104 121111100 12	auminy Company)			بر ص
The Articles of Organization for this Limited Lia	bility Company	were filed on 10/02/18		and assigned	F
Florida document number L12000115503	·			75.5 7.5 7.5 7.5 7.5 7.5 7.5 7.5 7.5 7.5	က်
This amendment is submitted to amend the follow	ving:			er sid	PH 9:
A. If amending name, enter the new name of	the limited liabi	lity company here:		RID AND	19
The new name must be distinguishable and contain the wo	rds "Limited Liabili	ity Company," the designation	"LLC" or the abbrev	viation "L.L.C."	
Enter new principal offices address, if applica	ble:				
(Principal office address MUST BE A STREET	ADDRESS)				
Enter new mailing address, if applicable:	010				
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>		•		
					
B. If amending the registered agent and/o	•		cords, <u>enter the</u>	name of ti	he new
registered agent and/or the new registered off	ice address here	<u>}</u> :			
Name of New Registered Agent:					
	12938 MALLO	RY CIRCLE APT 206			
New Registered Office Address:		Enter Florida street	address	<u> </u>	-
	ORLANDO		_, Florida <u>32828</u>	3	
	<u> </u>	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 605, 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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
		-	Change
			
			□ Change
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Effective date, if other th	an the date of filing:		(optional)
I'an effective date is listed, the c Note: If the date inserted in	date must be specific and cannot be prior this block does not meet the applica the Department of State's records.	to date of filing or more than 90 day	s after filing.) Pursuant to 605.0207
ne record specifies a do The 90th day after th	elayed effective date, but no ne record is filed.	t an effective time, at 12	:01 a.m. on the earlier of
Dated		<u>.</u> .	
	K.A	Solve	
		orized representative of a member	· -·

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00