

L130000127475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

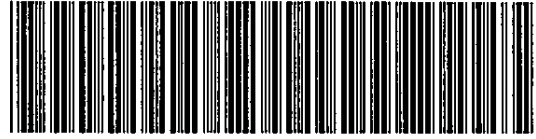
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

2\*

Office Use Only



700263735907

09/08/14--01005--005 \*\*35.00

14 SEP 24 AM 9 02

FILED  
SEP 24 2014  
MICHIGAN  
RECEIVED

R A / R O / ch 8  
10 @ 9.25.14

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Jogki Software LLC.  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

*\$35.00  
already paid.*

Please return all correspondence concerning this matter to the following:

David Logan  
Name of Person

Jogki Software, LLC.  
Firm/Company

834 Hillside Dr.  
Address

Palm Harbor, FL. 34683  
City/State and Zip Code

david.logan@Jogki.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Logan at ( 727 ) 543-6043  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$55 Filing Fee & Certified Copy

*\* Already  
Submitted  
Payment.*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 12, 2014

DAVID B. LOGAN  
JOGKI SOFTWARE, LLC  
834 HILLSIDE DR.  
PALM HARBOR, FL 34683

SUBJECT: JOGKI SOFTWARE, LLC  
Ref. Number: L13000127475

We have received your document for JOGKI SOFTWARE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 714A00019602

RECEIVED:

14 SEP 24 PM 12:27

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

1. Name of the limited liability company: Jogki Software, LLC.  
2. (a) 834 Hillside Dr. (b) 834 Hillside Dr.  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)  
Palm Harbor, FL. 34683 Palm Harbor, FL. 34683

3. 09/10/2013 4. L13000127475  
Date of filing/registration in Florida Document number

5. (a) United States Corporations Agents, INC.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

13302 Winding Oak Court  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
A  
Tampa, FL 33612

(b) David B. Logan  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
834 Hillside Dr.  
NEW Registered Office Address:  
Palm Harbor, FL 34683

14 SEP 24 AM 9:02  
FLORIDA DEPARTMENT OF REVENUE  
TALLAHASSEE, FLORIDA

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.

David B. Logan  
Signature of a member or authorized representative of a member

David B. Logan  
Printed or typed name of signee

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.

David B. Logan  
Signature of Registered Agent