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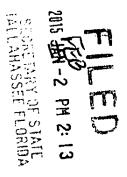
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COVER LETTER

TO: Registration Section Division of Corporat	ions			
SUBJECT: LOGICAL	ENERBY SOL	LUTIONS, LLC		
	Name of Limi	ited Liability Company		
The enclosed Articles of Amer	·	-		
Please return all correspondence	e concerning this matter	to the following:		
·	THEODORE	T. SOULOUNIAS Name of Person		
_		Name of Person		
	LOGICAL E	ENERGY SOLUTIONS, Firm/Company	-LC	
		Firm/Company		
	1206 GULF	rd .		
		Address		
<u></u>	TARPON SPA	RINGS, FL 34689		~3
		Chy/State and Zip Code		<u> </u>
_	E-mail address: (to be used for future annual report notification	tion)	
For further information concer	ning this matter, please c	all:	SSE C	
THEODORE SOUL	OUNIAS	at (121) 141 - 958 Area Code Daytime T	tion) ASSEE FLORIDE clephone Number	
. value of 1 of			Ş	<u></u>
Enclosed is a check for the fol	lowing 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 enclose	

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

LOGICAL ENCREY SO	LUTIONS, LLC	
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number L15000005942	any were filed on 1/10/15	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
<u> </u>		
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:	na	
(Principal office address MUST BE A STREET ADDRESS	'	
	-	
Enter new mailing address, if applicable:	n a	
(Mailing address MAY BE A POST OFFICE BOX)		200
		\$5.50 \
	214 9507-16	그 무 그 11
B. If amending the registered agent and/or registered		ter the name of the new
registered agent and/or the new registered office address	<u>here</u> :	₽# 3
Name of New Registered Agent:	nla	
New Registered Office Address:		•
	Enter Florida street address	
	, Florida	1
	City	Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent being filed to merely reflect a change in the registered off company has been notified in writing of this change.	lete performance of my duties, and I a as provided for in Chapter 605, F.S.	am familiar with and Or, if this document is e limited liability

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member <u>Title</u> <u>Name</u> Address **Type of Action** 1206 GULF RD MGR THEODORE T. SOULOUNIAS TARPON SPRINGS, FL 34689 Remove MER NICKOLAS J. RICHARDSON 2218 PALMETTO DR CLEARWATER, FL 33763 _□ Add _□ Remove □ Add □ Remove □ Add □ Remove

PLEASE.	ADD	EIN#	41-2	927681	TO	LOGICAL
ENCREY	SOLU	TIONS,	LLC	FILING	INF	ORMATION
				·	<u>-</u> -	· · · · · · · · · · · · · · · · · · ·
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