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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Special Instructions to Filing Officer: |
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Office Use Only



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JUL 2 6 2016 S. YOUNG

COVER LETTER

| TO: Registration Section Division of Corporations | | | | | |
|---|---|--|--|--|--|
| SUBJECT: Logoclick, LLC Name of Lin | nited Liability Company | | | | |
| | | | | | |
| Dear Sir or Madam: | | | | | |
| The enclosed Registered Agent/Registered Office Chan | ge and fee(s) are submitted for filing. | | | | |
| Please return all correspondence concerning this matter | to the following: | | | | |
| • | | | | | |
| Lyssa-Phifer Name of Person | | | | | |
| Lyssa-Miter | | | | | |
| Name of Person | | | | | |
| | | | | | |
| Lyssa Prifer CRA Firm/Company | | | | | |
| Firm/Company | | | | | |
| 0 12 0 0 0 0 0 0 0 0 | | | | | |
| 900 SE Ocean Blud ZIZE Address | <u> </u> | | | | |
| Address | | | | | |
| /1 4 5 20000 | | | | | |
| Stuart, FL 34994 City/State and Zip Code | | | | | |
| City/State and Zip Code | | | | | |
| 1450 Arte @ 1450 Arter cpa. con E-mail address: (to be used for future annual repo | rt notification) | | | | |
| For further information concerning this matter, please of | all: | | | | |
| Lyssa Phifer at (1 | 172 , 233-4448 | | | | |
| Name of Person | Area Code & Daytime Telephone Number | | | | |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: | | | | |
| Registration Section | Registration Section | | | | |
| Division of Corporations | Division of Corporations | | | | |
| Clifton Building | P.O. Box 6327 | | | | |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 | | | | |
| Tallahassee, Florida 32301 | | | | | |
| Enclosed is a check for the following amount | t: | | | | |
| \$25 Filing Fee | □ \$55 Filing Fee & Certified Copy | | | | |

INHS18 (2/14)

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. Na | me of the limited liability company: Logothe | K, LL | <u> </u> | | |
|--|--|---|---|--|--|
| 2. (a) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | (b) | 897 | Me MoCochto Mailing address of limited li (Note: MAY BE POST (| iability company: |
| | Jensen Beach, Fr. 34957 | | Jense | n Beach, Fi | 34957 |
| 3. | 6/20/16 Date of filing/registration in Florida | — _{4.} - | Llbc | 00098813 Document number | |
| 5. (a) | 11 1.1 61 1.0 0 | | | | SECRETARY FALLAHASSE 16 JUL 25 |
| | Registered Office Address (MOST BE FLORIDA STREET | | | | ARY OF A |
| | Tampa, F | 336 | 12 | | 2: \8 |
| (b) | Enter name of NEW Registered Agent and/or NEW Registered | ed Office add | ress: | | |
| | NEW Registered Office Address: | ZB | | | |
| | Stuck, F | EL 3499 | 74 | | |
| the cha agent was/w | imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the | of the regist liability cor s of the limi | tered office npany, it is ted liability | e and the business offi s hereby confirmed that y company or as other | ce of the registered at the change(s) |
| _ | ture of a member or authorized representative of a member | | niel 6 | Printed or typed name of | |
| I here provisi the obj towned houfie | by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provid ely reflect a change in the registered office address, d in writing of this change. | gree to act te performa ded for in C I hereby co | in this cape nce of my c hapter 605 nfirm that | acity. I further agree duties, and I am famili , F.S. Or, if this docu the limited liability co | to comply with the iar with and accept ment is being filed mpany has been |
| Signatu | re of Resistered Agent | | | | |