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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	—
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COVER LETTER

BP Logico			
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Marcus Pratt		
	BP Logico LLC	Name of Person	
	6619 Stark Rd	Firm/Company	
	Name of Person BP Logico LLC Firm/Company 6619 Stark Rd Address Seffner, FL.33584 City/State and Zip Code bplogico@gmail.com E-mail address: (to be used for future annual report notification) information concerning this matter, please call: (813 808-0049		
	bplogico@gmail.com	City/State and Zip Code	Daytime Telephone Number B \$60.00 Filing Fee, Certificate of Status &
	E-mail address: (to be used for future annual report notifi	ication)
For further information of	concerning this matter, please ca	all:	
Marcus Pratt		at ()	
Name (of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	be following amount:		
□ \$25,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

Registration Section
Division of Corporations

TO:

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

(Name of the Limit	ed Liability Company as it now ap (A Florida Limited Liability Compar	pears on our records.) ny)	
he Articles of Organization for this Limited L. lorida document number 1.16000212945	iability Company were filed on	11/21/2016	and assigned
his amendment is submitted to amend the foll	owing:		
If amending name, <u>enter the new name o</u>	f the limited liability compan	y here:	
he new name must be distinguishable and contain the v	vords "Limited Liability Company," (he designation "LLC" or the ab	breviation "L.L.C"
Enter new principal offices address, if applic	eable:		·
Principal office address MUST BE A STREI	ET ADDRESS)	<u> </u>	
			<u> </u>
		<u>-</u>	
inter new mailing address, if applicable:			<u></u>
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
3. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	Vor registered office address ffice address here: Marcus Pratt	on our records, <u>enter</u>	the name of th
	6619 Stark Rd		
New Registered Office Address:		Florula street address	
	Seffner	. Florida	584
		, i ivi iua	

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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Dawn Benedetti		
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		New Port Richey, FL 34654	■ Remove
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			7/31/2019)		,	41 IV		
Effective date, if on the artiful of the date in the date instance document's effective date in the da	sted, the date must be serted in this bloc	be specific and rk does not п	cannot be princet the appl	licable statut	iling or more ory filing re	han 90 days a	ptional) fler filing.) Pt this date wil	irsuant to I not be	605.0207 listed as
ne record specifi The 90th day a	es a delayed e after the reco	effective d d is filed.	late, but r	not an effe	ective time	e, at 12:0	1 a.m. on	the e	arlier of
Dated		^		·	\wedge				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00