## 117000038423

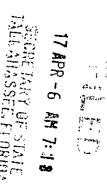
questor's Name)	
dress)	
dress)	,
y/State/Zip/Phon	e #)
☐ WAIT	MAIL
siness Entity Nar	me)
cument Number)	)
_ Certificates	s of Status
Filing Officer:	
	dress)  dress)  y/State/Zip/Phon  WAIT  siness Entity Nat  cument Number)

Office Use Only



300297551933

04/06/17--01018--012 \*\*25.00



## **COVER LETTER**

TO: Re Di	egistration Se vision of Cor	ction porations			
SUBJECT		OPERTIES LLC			
Sebate:	•	Name of Lim	ited Liability Company		
				<i>:</i>	
The enclose	ed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspondence concerning this matter to the following:					
		DEBORAH ROSE TRAC	Y, ESQ.	•	
			Name of Person	. :	<del></del>
		LAW OFFICES OF DEBO	DRAH ROSE TRACY, P	'A	
		- Aldrew - Free	Firm/Company		
		PO BOX 101			
			Address		
		VALRICO, FL 33595		• *	
			City/State and Zip Code		
		DEBORAH@DTRACYLA		7 3	
			to be used for future annual	героп пописан	on)
For further	information co	oncerning this matter, please ca	all:		
DEBORA	H TRACY		813 31 at ( )	4-2133	
,	Name o	f Person	Area Code	Daytime Tel	ephone Number
Enclosed is	s a check for th	ne following amount:			
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is end		□ \$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

LOGIC PROPERTIES LLC	के हैं है। के हैं कि क	
(Name of the Limited Liability Company: (A Florida Limited Liab	as it now appears on our records.)	<del> </del>
(A Florida Diffilled Liab	Set Company)	
e Articles of Organization for this Limited Liability Company we	ere filed on FEBRUARY 17, 2017	and assigned
1.17000038423		
orida document number L17000038423		
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liability	y company here:	
	·	
e new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the	abbreviation "L.L.C."
	***	
ter new principal offices address, if applicable:		
incipal office address MUST BE A STREET ADDRESS)	•	
	• •	
-	* * * * * * * * * * * * * * * * * * *	
	th ma New cod	
ter new mailing address, if applicable:	7, 3*	
ailing address MAY BE A POST OFFICE BOX)	·	
-		
If amending the registered agent and/or registered offic	e address on our records, enter	r the name of the
gistered agent and/or the new registered office address here:	•	يزي:
	,	
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:		O Brown
	Enter Florida street address	9 2 1
	Elife Floridge	

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.

City

If Changing Registered Agent, Signature of New Registered Agent

::,.

44

Zip Code

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	Al ext 2. 2.7 2. 4.
<u>Title</u> <u>Name</u>	Address

Title	<u>Name</u>	Address	Type of Action
MGR	TALAL KAZBOUR	1326 E LUMSDEN ROAD	■ Add
		BRANDON, FL 33511	
		BRANDON, FL 33311	☐ Remove
			Change
			Add
		S. Programme of the control of the c	□ Remove
			☐ Change
		. <del>.</del>	
			☐ Remove
			□ Change
		Acres	
		·	☐ Remove
		· · ·	Change
		. '	Add
			□ Remove
			☐ Change
		, ;	□ Add
			☐ Remove
			☐ Change

• •	-		
1			
****		,	· · · · · ·
	<u></u>	, I	
· · · · · · · · · · · · · · · · · · ·		. ; '	
***************************************			
<del></del>			· · · · · · · · · · · · · · · · · · ·
ective date, if other than the date of fil	ling:	· 	(optional)
effective date is listed, the date must be specific te: If the date inserted in this block does not ument's effective date on the Department of the cord specifies a delayed effective	ot meet the applicable of State's records.	statutory filing requiremen	ats, this date will not be listed
he 90th day after the record is file			
ed MARCH 29			
. , , , , , , , , , , , , , , , , , , ,	っ	0.056	

Page 3 of 3

Filing Fee: \$25.00