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COVER LETTER

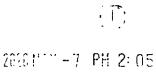
TO:

Registration Section

Division of Cor	porations			
LOGAINV.	ESTMENT"LLC"			
SUBJECT:	Name of Lim	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:		
		Name of Person		
	SUCCESS BUSINESS SOLUTION			
	Firm/Company			
	2751 S CHICKASAW TR	STE 106		
		Address		
	ORLANDO / FLORIDA /	32829		
		City/State and Zip Code		
	E-mail address: (to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
MARIET OSTOS		407 745-4684		
Name o	f Person	at ()	ne Telephone Number	
Enclosed is 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 enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres Registration S		<u>Street Address:</u> Registration Se	ection	
Division of C	orporations	Division of Co	rporations	
P.O. Box 632 Tallahassee, I		The Centre of 7415 N. Monro	Fallahassee oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



LOGAINVESTMENT"LLC"						
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)						
	any were filed on 08/02/2017 and assigned					
Florida document number L17000166535						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited I	liability company here:					
LOGAINVESTMENT, LLC						
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS	<u> </u>					
Enter new mailing address, if applicable:						
•						
(Mailing address MAY BE A POST OFFICE BOX)						
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our records, <u>enter the name of the new registe</u>					
Name of New Registered Agent:						
New Registered Office Address:						
THE CONTRACTOR OF THE PROPERTY.	Enter Florida street address					

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

, Florida _

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	PEDRO LUIS GARCIA	13263 STRODE LANE WINDERMERE	
		F1. 34786	□Remove
			■Change
MGR	GUILLERMO LOPEZ	1205 SEBURN RD APOPKA FL 32703	□ Add
		·	□Remove
			= Change
			□ Add
			□Remove
			□Change
			□Add
			🗆 Remove
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ective date, if other than the d	03/01/20	19	(optional)	
neffective date is listed, the date must be te: If the date inserted in this bloc	specific and cannot be pr	for to date of filing or me	ore than 90 days after filing.)	Pursuant to 605.020
cument's effective date on the Dep	rtment of State's recor	ds.	requirements, this date v	viii not be fisted as
cord specifies a delayed effective of	ate, but not an effective	e time, at 12:01 a.m. c	in the earlier of: (b) The	90th day after the
s filed.				
MARCH 24TH	2020			
ted		<u> </u>		
	Todo Jui	s Garcia		
Si	gnature of a member or au		of a member	
	PEDRO LUIS GAI	2674		

Filing Fee: \$25.00