

L18000 176018

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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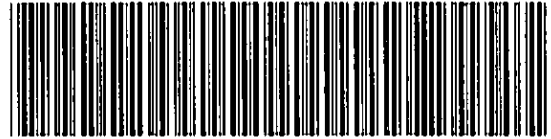
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CLSI GLOBAL LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

COREY LOCKETT  
Name of Person  
CLSI GLOBAL LLC  
Firm/Company  
4905 34TH ST SOUTH #130  
Address  
ST PETERSBURG, FL 33711  
City/State and Zip Code  
CLSLOGIC@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

COREY LOCKETT 727 6881391  
Name of Person at ( ) Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

CLSI GLOBAL LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on MAY 31 2018 and assigned  
Florida document number L18000136018.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

CLSI GLOBAL LLC

The new name must be distinguishable and contain the words "Limited Liability 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)

4905 34TH ST SOUTH SUITE 130

ST PETERSBURG, FL 33711

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4905 34TH ST SOUTH SUITE 130

ST PETERSBURG, FL 33711

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

COREY LOCKETT

New Registered Office Address:

4001 38TH ST SOUTH

*Enter Florida street address*

ST PETERSBURG

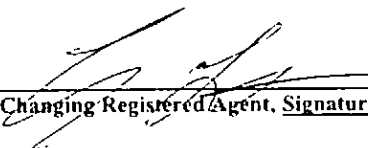
*City*

, Florida 33711

*Zip Code*

**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>	<u>Address</u>	<u>Type of Action</u>
MGR	COREY LOCKETT	4905 34TH ST SOUTH SUITE 1	<input checked="" type="checkbox"/> Add
		ST PETERSBURG, FL 33711	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	COREY LOCKETT	4905 34TH ST SOUTH SUITE 1	<input checked="" type="checkbox"/> Add
		ST PETERSBURG, FL 33711	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	COREY LOCKETT	4001 38TH ST SOUTH	<input checked="" type="checkbox"/> Add
		ST PETERSBURG, FL 33711	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	COREY LOCKETT	4001 38TH ST SOUTH	<input checked="" type="checkbox"/> Add
		ST PETERSBURG, FL 33711	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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**Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated JUNE 13, 2018

**Filing Fee: \$25.00**