L20 000 023 915

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700400656857

01/20/23--01003--004 **60.00

7737720 775769

COVER LETTER

TO: Registration Section
Division of Corporations

Prologix G SUBJECT:	lobal LLC		
SODADCT.		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Christian Bustamante		
		Name of Person	
	Prologix Global LLC		
		Firm/Company	
	7860 Peters Rd Suite F-10	8	
		Address	2
	Plantation, FL 33324		20
		City/State and Zip Code	50
	chris@prologixcorp.com		•
	E-mail address: (to be used for future annual report notif	ication)
For further information e	oncerning this matter, please c	all:	6 1
Christian Bustamante		786 534-7230	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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	is:	Street Address:	
Registration S		Registration Sec	tion
Division of C	•	Division of Corp	
P.O. Box 632		The Centre of Ta	
Tallahassee,	ニレ シムシ 14	2413 IN. IVIONIOC	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Prologix Global LLC			
(<u>Name of the Limited 1.</u> (A F	iability Compa Torida Limited	i <mark>ny as it now appears on our record</mark> Liability Company)	<u>(5.</u>)
The Articles of Organization for this Limited Liabil	ity Company	were filed on 01/16/2020	and assigned
Florida document number L20000023915	·		
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liab	ility company here:	
The new name must be distinguishable and contain the words	"Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	2:	7860 Peters Rd Suite F-108	:. 23:11
(Principal office address MUST BE A STREET A	Plantation, FL 33324	- (
· · · · · · · · · · · · · · · · · · ·		*****	r.)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7860 Peters Rd Suite F-108	
		Plantation, FL 33324	
	··-		Φ.
B. If amending the registered agent and/or registered and/or the new registered office address he Name of New Registered Agent:			the name of the new regist
N P	860 Peters Rd	Suite F-108	
New Registered Office Address:		Enter Florida street addres	X
P	lantation	FI	orida ³³³²⁴
	•	City	Zip Code

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>	Name	Address	Type of Action
AMBR	Karlos Soto	420 Eagle Rock Dr	□Add
		Ponta\e Vedra, FL 32081	≡ Rетюче
			□Change
			□Add
			——————————————————————————————————————
			Change
			DAdd
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			Change
			□Add
		- , , , 	□ Remove

1.00				
		·		
				
· · · · · · · · · · · · · · · · · · ·				
	·			
	· · · · · · · · · · · · · · · · · · ·			
			······································	~
			<u> </u>	: :
				20
				
				<u> </u>
				
Iffective date, if other than the date of filing: 'an effective date is listed, the date must be specific and cannot be Note: If the date inserted in this block does not meet the a locument's effective date on the Department of State's recommendate.	prior to date of filir pplicable statutor	ng or more than 90 day		
record specifies a delayed effective date, but not an effect d is filed.	ive time, at 12:01	a.m. on the earlier	of: (b) The 9	0th day after th
Dated January 1 , 2023	0-4	-		
/ •				