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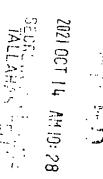
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COVER LETTER

	istration Sect sion of Corp			,	š
SUBJECT:	Logica Const	truction, LLC	,		,
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Name of Lim	ited Liability Company	<u></u>	
The enclosed	Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please return	all correspond	dence concerning this matter	to the following:		
Name of Person					
		Logica Construction, LLC			
			Firm/Company		
4636 NW 84th Ave #46					
			Address		
		Doral, FL 33166			
		assetmanagment@logicaser	City/State and Zip Code vices.com		
			to be used for future annual report notification)		s 2
For further in	formation cor	ncerning this matter, please ca	all:	IA.	ECT.
Carlo Sollam			786 717-8841	0.3	SECGT (14.
	Name of I	Person	Area Code Daytime Telepho	one Number 5	
Enclosed is a	check for the	following amount:			- N
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ Certified Copy (udditional copy is enclosed)	\$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is e	e, atus &

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Logica Construction, 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 <u>June 30, 2021</u> and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address City

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Jose Gomez	8237 NW 44th Terrace	≣ Add
		Doral, FL 33166	□Remove
			□Add
			□Remove
			□Add
		 	Remove
			QAdd QAdd QRemove
			rr: ∞ □Change
			□Add
			□Remove
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			□ n

Filing Fee: \$25.00