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(Re	questors Name)	
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(1.0	u.c.53,	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	 -
,	·	
	cument Number)	
(50	coment Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filina Officer:	
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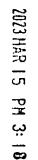
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COVER LETTER

TO:

Registration Section

Division of Cor	porations		
CHD IF CT.	Lasin and Paris	to 117	
SUBJECT:	Name of Lim	ts LLC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	Zuya	y Wheat	
		C Name of Person	
	Logic ar	nd Projects	
	V	FirM/Company	
	3213 West Pe	arl Ave Address	
		Address	
	Tampa.	FLori da 33611 City/State and Zip Code	
		City/State and Zip Code	
	logic and orbjects E-mail address: (s of mail form to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
			
Name o	Wheat	at (<u>717</u>) <u>965 - 5</u> Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
☼ \$25,00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee.
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
			(additional copy is enclosed)
Mailing Addres		Street Address:	
Registration S		Registration Se	
Division of C	-	Division of Co	-
P.O. Box 632 Tallahassee, 1		The Centre of 2415 N. Monre	rananassee oe Street, Suite 810
rananassee, l	المراجع المراج	aria (N. DIOHI)	or other cutter of the

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Logic and Project	cts LLC lompany as it now appears on our r		_ _
(<u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears on our r nited Liability Company)	<u>ecords.</u>)	
The Articles of Organization for this Limited Liability Com Florida document number	pany were filed on $\frac{2/2}{}$.0/23	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	I liability company here:		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation	"LLC" or the abbrevi	22 n "L.L.C."
Enter new principal offices address, if applicable:		·	
(Principal office address MUST BE A STREET ADDRES	<u></u>	<u>:.</u>	
		<u></u>	
			CO Sund
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>e</u>	nter the name of	the new registered
Name of New Registered Agent:	_ 		
New Registered Office Address:			
	Enter Florida street c	address	
		_, Florida	
	City	Zi	p 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>	Address	Type of Action
<u>AMBR</u>	Zuchary Wheat	3213 W. Pearl Ave Tampa, FL 3361	<u>l</u> [ҲAdd
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			_ □Change
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(If an effect Note: 11	e date, if other than the date of filing:
ne record s ord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the l.
Dated	March 10 2023.
	Signature of a member or authorized representative of a member