

M14 600001319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

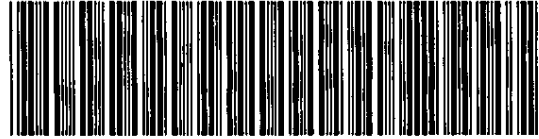
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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MAR 17 PM 1:45  
TALLAHASSEE STATE  
FLORIDA

J. Stivers MAR 19 2014

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PROLOGIQ BUSINESS SERVICES LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KUMAR SUBRAMANIAN  
Name of Person

PROLOGIQ BUSINESS SERVICES LLC  
Firm/Company

19435 S.W. 25 CT.  
Address

MIRAMAR FL - 33029  
City/State and Zip Code

ksubrama2008@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KUMAR SUBRAMANIAN at (305) 724-5864  
Name of Person Area Code & Daytime Telephone Number

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA  
14 APR 17 PM 1:45

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**  
 \$25 Filing Fee     \$30 Filing Fee & Certificate of Status     \$55 Filing Fee & Certified Copy     \$60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: PROLOGIQ BUSINESS SERVICES LLC
2. Jurisdiction of its organization: DELAWARE
3. Date authorized to do business in Florida: 02/18/2014

SECTION II (4-7 complete only the applicable changes)

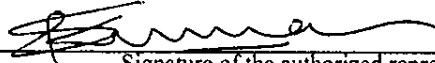
4. New name of the limited liability company: \_\_\_\_\_  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: \_\_\_\_\_

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: MR. KUMAR SUBRAMANIAN, COO  
19435 S.W. 25 CT. MIRAMAR FL 33029

7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

KUMAR SUBRAMANIAN

Typed or printed name of signee

Filing Fee: \$25.00

FILED  
TALLAHASSEE  
14 APR 7 PM 1:45