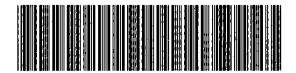
| (Requestor's Name) | _ |
|---|---|
| (Address) | _ |
| (Address) | _ |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | _ |
| (Document Number) | _ |
| Certified Copies Certificates of Status | - |
| Special Instructions to Filing Officer: | 7 |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF COR | PORATION: | LOGIOPS CORP. | |
|--|--|--|--|
| DOCUMENT NU | MBER: | P09000010668 | |
| The enclosed Artic | cles of Amendment and fee | are submitted for filing. | |
| Please return all co | orrespondence concerning th | is matter to the following: | |
| | ! | Robert P. Lithman | |
| | 1 | Name of Contact Person | |
| | Orshan, Lithman, Seide | en, Ramos, Hatton, Huesmann Firm/ Company | & Fajardo |
| | 150 Alh | ambra Circle, Suite 1150 | whenever the second sec |
| | | V | |
| , | | ral Gables FL 33134 City/ State and Zip Code | |
| | | ity/ State and Zip Code | |
| ************ | rple E-mail address: (to be use | Olsrhh.com d for future annual report notification) | MANAGE - A SANGER |
| For further informa | tion concerning this matter, | please call: | |
| Robert | P. Lithman, Esquire | at (305) 8 | 58-0220 |
| Name | of Contact Person | Area Code & Daytime Tel | lephone Number |
| Enclosed is a check | for the following amount n | nade payable to the Florida Depar | tment of State: |
| | ☐ \$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Ad Amendment Division of P.O. Box 63 Tallahassee | Section Corporations 27 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301 | le . |

Articles of Amendment to **Articles of Incorporation** of

FILED 2009 DEC -7 PM 2: 28 SECRETARY OF STATE TALLAHASSEE, FLORIDA

LOGIOPS CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

P09000010668 (Document Number of Corporation (if known)

| Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation: | | is Florida Profit Corporat | tion adopts the fo |
|---|-------------------------|-------------------------------|---------------------------------------|
| A. If amending name, enter the new name | of the corporation: | | |
| | | | The nev |
| name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pr | e designation "Corp," | "Inc," or "Co". A profes | sional corporation |
| 3. Enter new principal office address, if ap Principal office address <u>MUST BE A STREA</u> | | | · · · · · · · · · · · · · · · · · · · |
| | | | |
| C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) | | | |
| | | | · · · · · · · · · · · · · · · · · · · |
| | | | |
| . If amending the registered agent and/or | registered office addre | ess in Florida, enter the na | me of the |
| new registered agent and/or the new reg | istered office address: | · | |
| Name of New Registered Agent: | | | |
| | | | |
| New Registered Office Address: | (Florida str | eet address) | |
| | | , Florida | a |
| | (City) | (Zip Code) | |
| ew Registered Agent's Signature, if changi | ng Registered Agent: | | |
| hereby accept the appointment as registered o | | ith and accept the obligation | ns of the position. |
| | | | |
| <u>.</u> | Signature of New Regist | ered Agent, if changing | • |

Page 1 of 3

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

| Title | <u>Name</u> | Address | Type of Action |
|--------------------|---|---|-----------------------|
| P/D | Porfirio A. Hernandez | 14707 South Dixie Highway Miami FL 33176 | |
| P/D | Manuel S. Rodrigues | 14707 South Dixie Highway Miami EL 33176 | _ ☑ Add _ □ Remove |
| | | | Add Remove |
| | | | |
| E Ifamor | dina an addina addina a saibha a s | mton ohange(a) hence | |
| (attach a | ding or adding additional Articles, enditional sheets, if necessary). (Be s | nter change(s) nere: pecific) | |
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| F. <u>If an ar</u> | nendment provides for an exchange, | reclassification, or cancellation of is | sued shares, |
| | ons for implementing the amendmen ot applicable, indicate N/A) | it is not contained in the amendment | itseii: |
| (9 " | or approacto, mateure (m) | | |
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A. A.

| The date of each amendmen | t(s) adoption: October 14, 2009 |
|--|--|
| Effective date if applicable: | October 14, 2009 (date of adoption is required) |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| | ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. |
| | are approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes | cast for the amendment(s) was/were sufficient for approval |
| by | (voting group) |
| | (voting group) |
| The amendment(s) was/we action was not required. | re adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/we action was not required. | re adopted by the incorporators without shareholder action and shareholder |
| Dated (Signature | OCT 14/2009. |
| (By | a director, president or other officer - if directors or officers have not been |
| | cted, by an incorporator – if in the hands of a receiver, trustee, or other court cointed fiduciary by that fiduciary) |
| | MANUEL S. RODRIGUES |
| | (Typed or printed name of person signing) |
| | PRESIDENT/DIRECTOR |
| | (Title of person signing) |