P190000 2723

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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORA	ATION: LOGIPRIME, INC	D.		
DOCUMENT NUMBI	P19000002723			
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
i	RODNEY S WHITE CPA			
_		Name of Contact Person	n	
Ī	RODNEY S WHITE CPA			
_		Firm/ Company		
	4650 LIPSCOMB ST NE, SUITE 20			
<u> </u>		Address		
E	PALM BAY, FL 32905			
_		City/ State and Zip Cod	e	
RODW	VHITECPA@EARTHLINK	.NET		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information RODNEY S WHITE C	concerning this matter, pleas		728-9366	
Name of Contact Person		at (Area Co	de & Daytime Telephone Number	
	the following amount made			
■ \$35 Filing Fee	□\$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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation of

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LOGIPRIME, INC.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P19000002723	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this attacks of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Gword "chartered," "professional association," or the abbreviation ".	," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	720
	7019 FEB
	第 一
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
item registered agent and/or the new registered office address.	PH 7.2
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	Florida
•	(City) (Zip Code)
Non-Borison I Association (C. 1)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
, , , , , , , , , , , , , , , , , , ,	A was known
Signature of New Ro	egistered Agent, if changing

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			···	
				,
	<u></u> -		·····	·
f an amendment provides for an excha	nge, reclassification, or	ancellation of issued	sha <u>res</u> ,	
provisions for implementing the amen (if not applicable, indicate N/A)	ment if not contained in	the amendment itse	<u>lf:</u>	
		_		
		·		

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Şal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PVST	MICHAEL W JAMES	1150 SERENADE ST NW
XAdd			PALM BAY, FL 32907
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
6) Change			
Add			
Remove			

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendmen fficient for approval.	1(s)
	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	der
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
01/29/2019		
Dated	irector, president or other officer – if directors or officers have not bee	
selecte	irector, president or other officer – if directors or officers have not beed, by an incorporator – if in the hands of a receiver, trustee, or other collect fiduciary by that fiduciary)	n Purt
	MICHAEL W JAMES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	