L160000 78488

(Requestor's Name)
(Address)
(Address)
(100,000)
A
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Link, Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

TO: Registration Section Division of Corporations

Leo Dr LLC

SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Mark Thome			
Name of Person				
	Leo Dr LLC			
	Firm/Company			
14665 Patrick Henry Hwy			ALCONO 14	
		Address		
	Roseland, VA 22967		1	
	ROSCIAIII, VA 22907	City/State and Zip Code		
	mark.thome@hotmail.com	·		
	-	(to be used for future annual report notif	fication)	
For further information of	concerning this matter, please c	call:		
Lisbet Thiron-Joyce		727 998-1219		
Name o	of Person	at () Area Code Daytime	e Telephone Number	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section		Street Address: Registration Sec	etion	
Division of Corporations		Division of Cor	porations	
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LISO DR LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited Liability Company orida document number <u>L16000078488</u> .	were filed on APRIL 20, 2016	and assigned
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	ility company here:	
e new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of	or the abbreviation "L.L.C."
iter new principal offices address, if applicable:	14665 Patrick Henry Hwy	
rincipal office address MUST BE A STREET ADDRESS)	Roseland, VA 22967	雪雪雪
		
ter new mailing address, if applicable:	14665 Patrick Henry Hwy	
ailing address MAY BE A POST OFFICE BOX)	Roseland, VA 22967	
		; · i
If amending the registered agent and/or registered office a ent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Flori	
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

LEO DO LA O

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
MGR	Mark Thome	14665 Patrick Henry Hwy.	
		Roseland, VA 22967	□Remove
AMBR	Chary Corp by Lisbet ThironJoyce	4125 NW 85th PL	
		Gainesville, FL 32653	□Remove
			Change
			□Remove □Remove □Remove □ □CHunge
			□Add
			□Remove
			□Change
	~		□Add
			□ Remove
			Change
			□Add
			□Remove

Signature of a member or authorized representative of a member