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To:

Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN : LEONESSA INVESTEMENT LLC

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Page Count	04
Estimated Charge	\$25.00

2023 APR 2 D PH 1: 54



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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Leonessa Investement LLC			
(<u>Name of the Limited Liabi</u> (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)		
The Articles of Organization for this Limited Liability (Florida document number L22000388158	Company were filed on <u>09/06/22</u>	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company here:		
Leonessa Investment LLC			
The new name must be distinguishable and contain the words "Lit	mited Liability Company," the designation "LLC" or the al	obreviation "EP,C."	
Enter new principal offices address, if applicable:		· AP :	
(Principal office address MUST BE A STREET ADD	PRESS)	<u> </u>	
Enter new mailing address, if applicable:		·· (7)	
(Mailing address MAY BE A POST OFFICE BOX)		4. -	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		ne of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
THE INEQUITIES STITLE FLAME COL.	Enter Florida street address		
	. Florida		
	City	Zip 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 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	Kidanemariam, Tirsit	7901 4th St N STE 300	X lAdd
		St. Petersburg FL 33702	P □ Remove
			□Change
		44	□Add
			□Remove
			🗆 Change
			□Add
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			Change
			□Add
			□Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) E. Effective date, if other than the date of filing: (Optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Dated ____ 04/20 2023 **NAT SMITH** Typed or printed name of signee