## L24000059018

(Re	equestor's Name)	
(Ad	ldress)	<u> </u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	J.	HORNE
	MAR	HORNE 3 0 2024





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## **COVER LETTER**

TO: Registration S Division of Co			
Leon's Rei SUBJECT:	modeling LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	emitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Cristhian Leon		
		Name of Person	<del> </del>
	Leon's Remodeling LLC		
		Firm/Company	
	4522 W Village Dr #6105		
		Address	
	Tampa, FL 33624-3429		
		City/State and Zip Code	<del>1, 1</del>
	leonsolutionstpa@gmail.co		G
For further information	concerning this matter, please c	to be used for future annual report notiful.	ncation)
Yiliamne Gonzalez		813 240-8187	
Name	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

24 MAR 25 AN 11 32

Leon's Remodeling LLC		acords)
(Name of the Limited )	Liability Company as it now appears on our in Florida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liabi	lity Company were filed on 02-01-2024	and assigned
Florida document number L24000059078		
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
Leon Solutions USA LLC		
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	e:	····
Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable:	<del></del>	· · · · · · · · · · · · · · · · · · ·
Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or regi	<del>-</del>	enter the name of the new register
agent and/or the new registered office address h	<u>iere</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	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 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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			□Remove
			Change
		····	
		· · · · · · · · · · · · · · · · · · ·	□Remove
			☐ Change
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ective date, if other than to effective date is listed, the date in te: If the date inserted in this nument's effective date on the	nust be specific and block does not t	d cannot be prior to meet the applica	o date of filing or ble statutory fil	more than 90 days after	filing.) Pursuant to 605.0	020 d a
ecord specifies a delayed effects filed.	tive date, but no	t an effective tir	ne, at 12:01 a.m	. on the earlier of: (b	) The 90th day after	the
ed		2024				
	(	2				
	Signature of a	member or autho	rized representati	re of a member		

Filing Fee: \$25.00