

PIS00075SS6

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

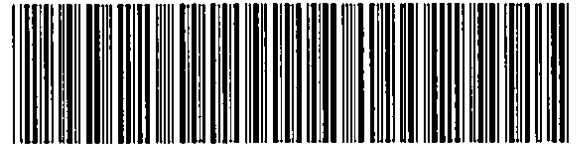
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2020 JUN 14 11:39

R. WHITE
JUN 03 2020

TO: Amendment Section
Division of Corporations

DOCUMENT NUMBER: P18000075886

CR2E0-45 (0-4/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LEADING PROPERTIES INC
2. The principal office address: 2291 LAKE WOODBERRY CIR, BRANDON, FL 33510
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/06/2018 Document number: P18000075886
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

GABRIELA MOTORGA

5902 MEMORIAL HWY, APT 916

TAMPA, FL 33615

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

GABRIELA MOTORGA

2291 LAKE WOODBERRY CIR

P.O. Box NOT acceptable

BRANDON, FL 33510

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Gabriela Motorga

Signature of an officer or director

GABRIELA MOTORGA PRESIDENT

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Gabriela Motorga

Signature of Registered Agent

05/11/2020

Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)