3585 NE 207T⊦ AVENTURA, F	I ST STE C9 #801822 L 33280			
Current Mai	ling Address:			
PO BOX 80 AVENTURA	18 22 FL 33280 US			
FEI Number: 03-0564970			Certificate of Status Desi	r <b>ed:</b> No
Name and Address of Current Registered Agent:				
SCHULZ, KLAL 3585 NE 207TH MIAMI, FL 332	I ST STE C9 #801822			
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.				
The above name	d entity submits this statement for the purpose of changing its regis	liered onice of regis	lered agent, or boun, in the State of Fior	ida.
	I entity submits this statement for the purpose of changing its regis E: KLAUS-PETER SCHULZ	lered onice of regis	lered agent, of bolin, in the state of hor	<sup>ida.</sup> 01/16/2019
		tered once of regis		
SIGNATURE	E KLAUS-PETER SCHULZ	lered onice of regis		01/16/2019
SIGNATURE	E: KLAUS-PETER SCHULZ Electronic Signature of Registered Agent	Title	CEO	01/16/2019
SIGNATURE Authorized	E: KLAUS-PETER SCHULZ Electronic Signature of Registered Agent Person(s) Detail :			01/16/2019
SIGNATURE Authorized	E: KLAUS-PETER SCHULZ Electronic Signature of Registered Agent Person(s) Detail : COO	Title	CEO	01/16/2019 Date

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KLAUS-PETER SCHULZ

CEO

01/16/2019

Electronic Signature of Signing Authorized Person(s) Detail

## 2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L05000062899

Entity Name: LEAPS AND BOUNDS INVESTMENT GROUP LLC

## **Current Principal Place of Business:**

FILED Jan 16, 2019 **Secretary of State** 5026733077CR

Date