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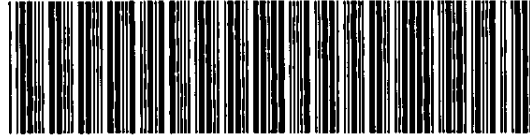
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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Barkett, Garavaglia & Lawn**

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⁸ ALSO ADMITTED IN THE COMMONWEALTH OF THE BAHAMAS

December 29, 2014

FEDERAL EXPRESS

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Leon and Leon of Indian River, LLC

Dear Sir:

Enclosed please find an original and one conformed copy of the Articles of Amendment to Articles of Organization for the above named limited liability corporation. I would appreciate your filing the original with your office and returning the conformed copy, with your Certificate attached together with a Certificate of Status, to this office.

I am also enclosing our check in the amount of \$60.00 covering the following:

Filing Fee	\$25.00
Certified Copy	30.00
Certificate of Status	5.00

Thank you for your consideration in this matter, and I enclose a return Federal Express envelope for your convenience in returning the documents to me.

Sincerely,

George G. Collins, Jr.
George G. Collins, Jr.
For the Firm
(mja)

GGC, JR./mja
Enclosures

LEON AND LEON OF INDIAN RIVER, LLC

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Leon, Jane G.	1839 Beyer Ave., Apt. B	<input type="checkbox"/> Add
		Philadelphia, PA 19115	<input checked="" type="checkbox"/> Remove
Member	Leon, Michelle	1839 Beyer Ave., Apt. A	<input type="checkbox"/> Add
		Philadelphia, PA 19115	<input checked="" type="checkbox"/> Remove
MGR	Leon, Jane G.	1839 Beyer Ave., Apt. B.	<input checked="" type="checkbox"/> Add
		Philadelphia, PA 19115	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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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)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 12-17-14, _____.

Jane G. Leon

Signature of a member or authorized representative of a member

Jane G. Leon

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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