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COVER LETTER

	Registration Se Division of Cor			
	Leone Inves	stment Properties, LLC		
SUBJEC.	1;	Name of Lini	ted Liability Company	
The encle	sed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please ret	turn all correspo	ndence concerning this matter	to the following:	
		Robert V. Leone		
			Name of Person	
		Leone Investment Propertie	es. LLC	
			Firm/Company	•••
		2211 Ashley Oaks Cir		
		Address		
		Wesley Chapel, FL 33544	•	
· •.		rleone@accurateadvisory.co	City/State and Zip Code	1 to 1
		E-mail address: (to be used for future annual report not	fication)
For furth	er information c	oncerning this matter, please ca	all:	
Robert V	.Leone		813 215-7783 at ()	
	Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed	l is a check for t	he following amount:		
■ \$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy fadditional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations fox 6327 assee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Fallahassee, FL 3	on cations enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Leone Investment Properties, LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company velocida document number L10000129251	were filed on 12/17/2010	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabil</u>	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		8
(Principal office address MUST BE A STREET ADDRESS)		SE SECH SIGN
CTINCIPAL OFFICE MALLES MOST DE ASTREET, IDONESSA		
	<u> </u>	£ 027
		₹ 3290
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, <u>er</u> :	nter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	Zip Code
	riere.	

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

Title	Name	Address	Type of Action
MGRM	The Leone Family Trust Dated 6/13/2004	2711 Ashley Oaks Cit Westey Chapet, FL 55544	Add
			■ Remove
			☐ Change
MGRM The Leone Family Trust Dated 3/21/2012	2211 Ashkey Oaks Cir Wesley Chapel, FL 33544		
			≡ Remove
			Change
AMBR	Robert V. Leone	2211 Ashley Oaks Cir Wesley Chapel, FL 33544	■ Add
			□ Remove
	•		☐ Change
AMBR Stephen Leone	2211 Ashley Oaks Cir Wesley Chapet, FL 33544		
		Remove	
		Change	
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fective date, if other than the date of filing:	(optional) or more than 90 days after filing.) Pursuant to 605.03
ote: If the date inserted in this block does not meet the applicable statutory cument's effective date on the Department of State's records.	filing requirements, this date will not be listed
;	
record specifies a delayed effective date, but not an effecti	ve time, at 12:01 a.m. on the earlier
The 90th day after the record is filed.	
9/20 2018	
Robert V. Lew mente	
1/1 TV Jane	

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Typed or printed name of signee

Filing Fee: \$25.00