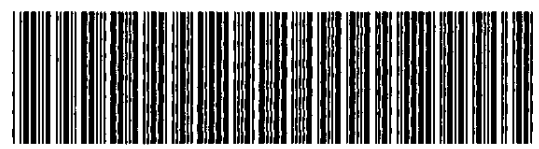


L11000124649



200214353992

11/21/11--01043--014 **25.00

FILED
11 NOV 21 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD
NOV 22 2011
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LEON MOTORS, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MIR AHMAD
Name of Person
LEON MOTORS, LLC
Firm/Company
2508 W TENNESSEE ST.
Address
TALLAHASSEE, FL 32304
City/State and Zip Code
mir754@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MIR AHMAD at (850) 345-0010
Name of Person Area Code & Daytime 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)
- \$60.00 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

LEON MOTORS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11-01-2011 and assigned Florida document number L 11000124649

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

FILED
11 NOV 21 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGRM</u>	<u>AHMAD, MIR</u>	<u>2508 W TENNESSEE ST.</u> <u>TALLAHASSEE, FL 32304</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>AHMAD, MIR</u>	<u>953 AUDREY CT.</u> <u>TALLAHASSEE, FL 32317</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>MIR, QAMER</u>	<u>953 AUDREY CT.</u> <u>TALLAHASSEE, FL 32317</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated NOVEMBER 18, 2011
Mir Ahmad

Signature of a member or authorized representative of a member

MIR AHMAD

Typed or printed name of signee



[Home](#) [Contact Us](#) [E-Filing Services](#) [Document Searches](#) [Forms](#) [Help](#)

[Previous on List](#) [Next on List](#) [Return To List](#)

Entity Name Search

No Events

No Name History

Submit

Detail by Entity Name

Florida Limited Liability Company

LEON MOTORS, LLC

Filing Information

Document Number L11000124649
FE/EIN Number NONE
Date Filed 11/01/2011
State FL
Status ACTIVE
Effective Date 11/01/2011

Principal Address

2508 W TENNESSEE ST
TALLAHASSEE FL 32304

Mailing Address

2508 W TENNESSEE ST
TALLAHASSEE FL 32304

Registered Agent Name & Address

AHMAD, MIR
953 AUDREY CT
TALLAHASSEE FL 32317 US

Manager/Member Detail

Name & Address

Title ~~MGR~~ **MGRM**

~~AHMAD, MIR
953 AUDREY CT
TALLAHASSEE FL 32317~~

**2508 W TENNESSEE ST.
TALLAHASSEE, FL 32304**

~~Title MGR~~

~~MIR, GAMER
953 AUDREY CT
TALLAHASSEE FL 32317~~

DELETE

Annual Reports

No Annual Reports Filed

Document Images

11/01/2011 -- Florida Limited Liability [View image in PDF format](#)