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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:		al Enterprises LLC ed Liability Company	<u> </u>		
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:					
		Oliver Lucas Name of Person			
LEOS Global Enterprises LLC					
Firm/Company 10952 S.W. 3rd ST #E-2					
Address					
Miami / Florida 33174 City/State and Zip Code					
info@leosenterprises.com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call: 786) 247-736		247-7363			
Oliver Lucas Name of Person		at (_786)	at (786) 623-5578 Area Code & Daytime Telephone Number		
	, or reison	Area Couc o	e Daymae receptione reunious		
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 e	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Regi Divi P.O.	Stration Section sion of Corporations Box 6327 shassee, 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

Name of the Limited Liability Compa (A Florida Limited I	nterprises LLC ny as it now appears on our records. Liability Company))		
The Articles of Organization for this Limited Liability Company Florida document numberL12000110436	were filed onsunbiz.org	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation	on "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	10952 S.W. 3RD ST #E-2			
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL US 33174	72 T2		
Enter new mailing address, if applicable:	10952 S.W. 3RD ST #E-2	SEP 27		
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL US 33174	m _e ≥ rr		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		er the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		l		
	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

Address Type of Action <u>Title</u> <u>Name</u> **MGRM ERIKA LUCAS BRIEVENBUS 4639** ☐ Add WILLEMSTAD/GROOT KWARTIER Remove CURACAO XX. 000000 XX. MODESTA CORRALES MGRM 10952 S.W. 3RD ST #E-2 **✓** Add MIAML FL US 33174 Remove ☐ Add ☐ Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MIAMI Dated . of a member of authorized representative of a member Oliver Lucas Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00