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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Leg Equipment 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:
David Bobadilla
Name of Person
Firm/Company
8600 NW 64+h St., Svite#8
Miami, Fl 33/66  City/State and Zip Code  davidbobadilla 00 gmail. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
David Bobadilla at (786) 580-9166  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$ \$\times \text{S25.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\$ \$\times \text{S60.00 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

Ley Equipment 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 of Florida document number <u>L1400011454.2</u>	were filed on 7/2//2014 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liability	y 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)	8600 NW 64th St, Svite #8 Miumi, FL 33166
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	8600 NW 69th St, Svite #8 Migni, FL 33166
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	ice address on our records, enter the name of the new
Name of New Registered Agent:  New Registered Office Address:  Z01	J. Osiason, Esq. Alhambia Circle Svite 1205
Lò(z	Enter Florida street address    Gables

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, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Osiason, Lee J	201 Alhambra circle, suite 1205	□ Add
		Coral Gables, FL 33134	■ Remove
			Change
MGR	David Bobadilla	8600 NW 64th st, suite #8	■ Add
		Miami, FL 33166	
			Change
			□ Add
			Remove
			Add 177
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Filing Fee: \$25.00