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(Re	equestor's Name)	
(Ad	ldress)	_
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COVER LETTER

TO: Registration So Division of Cor	rporations		
SUBJECT:	Leading Ed	dge Source ited Liability Company	LC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Nata	lie Charow Name of Person	
		g Edge Source	
	4443 Lyc	ns Road, Sui	te 209
	Coronut	Creek, FL City/State and Zip Code	33073
	natalie. Ch E-mail address: (1	Jarow A chem-	- 454. COM
For further information of	oncerning this matter, please ea	ill:	
Natalie Name o	Charow f Person	at (<u>954</u>) <u>556</u> Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Leading E (Name of the Limited Liability (A Florida	ty Company as it now appears Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability C Florida document number		01/08/2019	and as	signed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability company her	<u>e</u> :		
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the des	ignation "LLC" or the al	obreviation "L	L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR	<u></u>		- 4	
			<u> </u>	
			. 5	- (1)
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)			σ	<u> </u>
			= : 0	ว์
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our rec	ords, <u>enter the nan</u>	ie of the ne	w registered
Name of New Registered Agent:				
New Registered Office Address:	Enter Florid	a 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 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

<u>Title</u>	<u>Name</u>	Address 4443 Lyons Road, Ste. 209	Type of Action
HGR	Carrie Charow	Coconut Creek FL 3307 10440 South Barnsley Di Parkland, FL 33076	Z¤Add Vive
AP	NaTalie Charow	4443 Lyons Road, STA.209 Coronut Creek Fl 33073 10440 South Barnsley Dr. Parklank, FL 32076	_ 5 X Add / V ∕O
AP	Kenneth Charow	4443 Lyons Road, Ste. 209 Coconut Creek, FC 33073 10440 South Barisley Dr Parkland, FL 33076	_⊠Add ''V€
			_ □Change _ □Add
			_ □Remove
			_ □Change _ □Add
			_ □Remove
			_ □Change _ □Add
			_ □Remove
			□ Change

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(If an effec Note: If	e date, if other than the date of filing:
ne record ord is tiled	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	July 12. 2024.
	July 12. 2024. Addie Charby Signature of a member or authorized representative of a member
	Matalie Charow Typed or printed name of signee

Filing Fee: \$25.00