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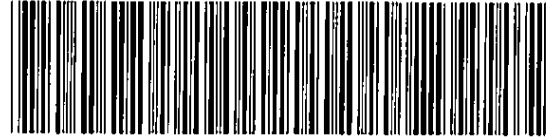
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Leo F. Weber Real Estate Investments LLC

Signature _____

Requested by: Seth

10/05/18

Name _____

Date _____

Time _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LEO F. WEBER REAL ESTATE INVESTMENTS 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:

ALEXANDER B. ROTBART

Name of Person

THE ROTBART LAW GROUP, PA

Firm/Company

101-103 EAST PALMETTO PARK ROAD

Address

BOCA RATON, FL 33432

City/State and Zip Code

same as current

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alexander B. Rotbart

at (561) 922-3217

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

1999 V 5-10 024

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

LEO F. WEBER REAL ESTATE INVESTMENTS 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 02/28/2018 and assigned
Florida document number L18000054096.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

City

, Florida

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>	<u>Address</u>	<u>Type of Action</u>
MGR	ROSEMARIE WEBER	150 NE 38TH STREET, OAKLAND PARK, FL 33334	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	ROSEMARIE WEBER AND ERIC P. WEBER TRUSTEES OF THE LEO WEBER CREDIT SHELTER TRUST DATED 10-11-2013	150 NE 38 STREET, #2, OAKLAND PARK, FL 33334	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	ROSEMARIE WEBER AND ERIC P. WEBER TRUSTEES OF THE ROSEMARIE WEBER REVOCABLE TRUST DATED 6-10-2011	150 NE 38 STREET, #2, OAKLAND PARK, FL 33334	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

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

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
 Note: If the date inserted in this block does not meet the applicability criteria, the filer must check the "Not Applicable" box.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated

9/25/2018

Signature of a member or authorized representative of a member

ERIC P. WEBER

Typed or printed name of signee