

L18000079963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

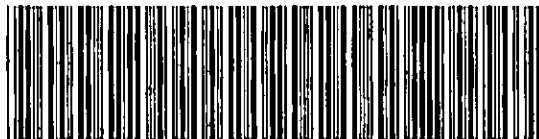
(Business Entity Name)

(Document Number)

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2018 APR 18 AM 10:41
CLERK OF COURT
MILWAUKEE COUNTY

APR 19 2018
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: remove 11116 N 19th address Tampa fl 33612 REplace with 2780 E Fowler Ave #155 Tampa

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:

Aileen Alontaga

Name of Person

Lepre Power LLC

Firm/Company

2780 E Fowler Ave #155

Address

Tampa FL 33612

City/State and Zip Code

AileenAlontaga@gmail.com

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

For further information concerning this matter, please call:

Derek Johnson

727 2878497

at () _____
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Lepre Power 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 March 26 2018 and assigned
Florida document number L18000079963.

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)

2780 E Fowler Ave #155

Tampa FL 33612

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2780 E Fowler Ave #155

Tampa FL 33612

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:

Aileen Alontaga

New Registered Office Address:

2780 E Fowler Ave #155

Enter Florida street address

Tampa

City

Florida 33612

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	Aileen Alontaga	2780 E. Fowler Ave #155	<input type="checkbox"/> Add
		Tampa FL 33612	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Dever Johnson	2780 E. Fowler Ave #155	<input type="checkbox"/> Add
		Tampa FL 33612	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2011 APR 28 AM 10:14
PALEMBANG
CITY
GOVERNMENT
OFFICE

FILED

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

Remove Any address of 11116 N 19th Street
only use

2780 E. Fowler Ave #155
Tampa FL
33612

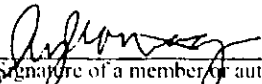
E. Effective date, if other than the date of filing: ~~04/16/2018~~ (optional)

(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 applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated April 16, 2018.


Signature of a member or authorized representative of a member

Aileen Alontaga
Typed or printed name of signer

2018 APR 18 AM 10:11
CLERK OF THE COURT
TALLAHASSEE, FLORIDA

FILED