(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

CHDIECT.	leadme2u.c	om LLC		
SUBJECT: Name of Limited Liability Company				
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	n all correspo	ndence concerning this matter	to the following:	
		Christine Frazier		
		 	Name of Person	
		leadme2u.comLLC		
			Firm/Company	
		137 E Crystal Lake Avenu	e	
			Address	
		Lake Mary, Florida 32740	5	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report noufic	cation)
For further in	nformation co	oncerning this matter, please ca	ail:	
Christine Fra	azier		407 314-0553 at ()	
	Name of	Person		Telephone Number
Enclosed is a	a check for th	e following amount:		
□ \$25.00 F	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

TO:

Registration Section
Division of Corporations

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

FILED

leadme2u.com LLC

(Name of the Limited Liability Company as it now appears on our records) Ke 25 P 3 13

Name of New Registered Agent: New Registered Office Address:	Enter Florida street address Florida City Zip Code
	Enter Florida street address
Name of New Registered Agent:	
B. If amending the registered agent and/or register registered agent and/or the new registered office addres	red office address on our records, <u>enter the name of the nev</u> s <u>s here</u> :
(Mailing address MAY BE A POST OFFICE BOX)	
Enter new mailing address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	<u></u>
Enter new principal offices address, if applicable:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
A. If amending name, enter the new name of the limited	d liability company here:
This amendment is submitted to amend the following:	
Florida document number L19000036141	
1 HVVVVV24 1.41	mpany were filed on Feb 5, 2015 SECRETARY DE STATE TALLAHASSEE and assigned

<u>New Registered Agent's Signature, if changing Registered Agent:</u>

'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 eing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany 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>	Type of Action
MGR	Connie Truman	4004 Staunton Avenue SE	mw
		Charleston, WV 25304	
			■ Remove
			Change
			Add
			☐ Remove
			□ Change
			Add
			□ Remove
			☐ Change
·			Add
		□ Remove	
		□ Change	
		Add	
		□ Remove	
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		☐ Remove	
		· · · · · · · · · · · · · · · · · · ·	Change

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Effectiv	Feb 6, 2019 e date, if other than the date of filing:(optional)
(If an effec Note: If	tive 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) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the at seffective date on the Department of State's records.
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 10th day after the record is filed.
Dated _	Signature of a nymber of authorized representative of a member
	Christine Frazier

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00