L20000237700

(Re	equestor's Name)	
(Ad	ldress)	
(Ád	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
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COVER LETTER

TO:

	stration Se sion of Cor			
	L FIT TEM		•	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	indence concerning this matter	to the following:	
		Irina Wetzel		
			Name of Person	
		LEIT TEMPLE LLC		
			Firm/Company	
		4300 S US HWY I STE	203-212	s 2
			Address	022 J
		Jupiter, FL 33477		E LE 2022 AUG 29 SECRETARY TALLAHA
			City/State and Zip Code	
		irinamwetzel@gmail.com		OF SI
For further in	formation c	E-mail address: (oncerning this matter, please ca	to be used for future annual report notification)	MI 8: II OF STATE SEE. FIL
Irina Wetzel			561 827-7365 at ()	
	Name o	f Person	Area Code Daytime Telephone No	umber
Enclosed is a	check for th	ne following amount:		
■ \$25.00 Fi	ling Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	00 Filing Fee, tificate of Status & tified Copy litional copy is enclosed)
	ing Addres		Street Address: Registration Section	
		orporations	Division of Corporations The Centre of Tallahassee	
	. Box 632 ahassee, I		2415 N. Monroe Street, Su	ite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

LEITTEMPLE LLC

(Name of the Limite	d Liability Comp A Florida Limited	any as it now appears on our records.) Liability Company)	
ne Articles of Organization for this Limited Lia orida document number <u>L20000237700</u>	bility Compan	y were filed on 03/10/2021	and assigned
is amendment is submitted to amend the follow	wing:		
If amending name, enter the new name of	the limited lia	bility company here:	
new name must be distinguishable and contain the wo	rds "Limited Liab	ility Company," the designation "LLC" o	or the abbreviation "L.L.C."
iter new principal offices address, if applica	ble:	4300 S US HWY 1 STE 203-212	2
rincipal office address MUST BE A STREET		Jupiter, FL 33477	
ter new mailing address, if applicable:		4300 S US HWY 1. STE 203-212	2
ailing address MAY BE A POST OFFICE B	<u>PON)</u>	Jupiter, FL 33477	
If amending the registered agent and/or re ent and/or the new registered office address Name of New Registered Agent:	~	address on our records, enter th	ne name of the new register TALLAH TALLAH
	4300 S US HV	WY 1. STE 203-212	SSSV M: E
New Registered Office Address:	1	Enter Florida street address	mes œ O
	Jupiter	. Flori	ida 33472; =
			

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 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	Irina Wetzel	4300 S US HWY 1. STE 203-212	□ Add
		Jupiter, FL 33477	Remove
			Change
			□Remove
			□Change
			SECRETARY OF STALL AHAS SEE FIL
			Add C
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ective date, if other than the	date of filing:				_ (optiona	al)		
effective date is listed, the date muse: If the date inserted in this bl	t be specific and car	nnot be prior to	date of filing o	r more than 90 d	ays after fili	ng.) Purs	mant to 6	505,020 isted a
ument's effective date on the D	epartment of State	e's records.	o statutory tr	g.requiree				
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cord specifies a delayed effectiv s filed.	e date, nut not an	errective time	e, at 12 91 a 1	u on mé éarne	a or (n)	The 901	n day ai	nei me
8/26/22	1	10:30 AM						
ed <u>8/26/22</u>	· _							
	7	Must		•				
	Signature of a men	1						