N9400003076

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A. Butter

COVER LETTER

TO: Amendment Section Division of Corporations

Leesburg NAME OF CORPORATION:	Partnership, Inc.		
N9400000307	6		
DOCUMENT NUMBER:	··		
The enclosed Articles of Amendment and	fee are submitted for fili	ng.	
Please return all correspondence concernin	g this matter to the follo	wing:	
Michelle Frazer			
	(Name of Co	ontact Person)	- **
Leesburg Partnership, Inc.			
	(Firm/ C	Company)	
401 West Magnolia St.			
	(Add	iress)	
Leesburg, FL 34748			
-	(City/ State a	and Zip Code)	
finance@leesburgpartnership.com			
E-mail address:	(to be used for future ar	nual report notificatio	n)
For further information concerning this ma	tter, please call:		
Michelle Frazer		at	352-365-0053
(Name of Con	tact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amou	int made payable to the	Florida Department of	State:
■ \$35 Filing Fee □\$43.75 Fili Certificate	_	Copy Certiful Copy is Certiful Copy is Certiful	0 Filing Fee feate of Status fed Copy tional Copy is osed)
Mailing Addrage		Stroot Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

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Leesburg Partnership, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N94000003076 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: _, Florida ____ (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John I V Mike SV Sally:	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change * Add	AR	Joanie Smalley	401 W Magnolia St. Leesburg, FL 34748
Remove			
2) Change Add			
Remove 3)			
4) Change Add	-		
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			<u> </u>
E. If amending or addin (attach additional shee	ng additional Ar ets, if necessary).	rticles, enter change(s) here: (Be specific)	
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The date of each amendment date this document was signed	t(s) adoption: l.		 .		, if other than the
Effective date if applicable:	2/23/2021				
in applicable.	(no mor	re than 90 days aft	er amendment file	date)	
Note: If the date inserted in the document's effective date on t	nis block does not m he Department of St	eet the applicable ate's records.	statutory filing re	quirements, this date w	rill not be listed as the
Adoption of Amendment(s)	(CHE)	CK ONE)			

■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 2124 121
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Lena Williams, President
(Typed or printed name of person signing)
President
(Title of person signing)