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2021 MAR 16 AM 6: 18
SECRETARY OF STATE

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	Leesburg Partnersh ON:	ip II, Inc.				
	N98000005863					
DOCUMENT NUMBER:			<del></del>			
The enclosed Articles of Ar	mendment and fee are sub	omitted for filing.				
Please return all correspond	lence concerning this mat	ter to the following	; <b>:</b>			
Michelle Frazer						
	<del></del>	(Name of Contact	t Person	)		
Leesburg Partnership, Inc.						
		(Firm/ Comp	any)			
401 West Magnolia St.						
		(Address)	)	•		
Leesburg, FL 34748						
· <u></u>	<del></del>	(City/ State and Z	ip Code	)	• •	
finance@leesburgpartnersh	ip.com					
	z-mail address: (to be use	d for future annual	report n	otification	)	
For further information con	cerning this matter, pleas	e call:				
Michelle Frazer			at		352-365-0053	
	(Name of Contact Person	1)	(Arc	a Code)	(Daytime Telephone Number)	
Enclosed is a check for the	following amount made p	ayable to the Florid	la Depa	rtment of !	State;	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional cop enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address		Street 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 of

FILED

Leesburg Partnership II, Inc. 2021 MAR 15 AM 6: 18 (Name of Corporation as currently filed with the Florida Dept. of State) N98000005863 SECRETARY OF STATE (Document Number of Corporation (if known), LAHASSEE, Fi 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 uddress) New Registered Office Address: 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 Do           V         Mike Jo           SV         Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	AR	Joanie Smallev	401 W Magnolia St. Leesburg, FL 34748
Remove			
2) Change Add			
Remove 3 ) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add		<del></del>	
Remove			. <u></u>
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		icles, enter change(s) here: (Be specific)	
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The date of each amendment date this document was signed	(s) adoption:						_, if other than the
Effective date <u>if applicable</u> :	2/23/2021						
<u></u>	(no i	nore than 90 da	iys after ame	ndment file di	ate)		

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.

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes east 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 $\frac{2(24)21}{2}$
Signature (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)