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"SECRETARY OF STATE AND AND STATE OR TO THE STATE OR TO THE

Amend C.COULLIETTE

MAR 11 2010

EXAMINER

COVER LETTER

Q.

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: Jessie J Leopard	PA
DOCUMENT NUMBER: P000000 86 341	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jessie Leonavel Name of Connact Person	
Jessie J Leanard PA	
4538 SE 5th Pl.#1	
Address (Apr Corp. FL. 339) City/State and Zip Code 11855ie@halled Davd. Co	04_ m
For further information concerning this matter, please call:	
Name of Contact Person at (239) 443- Area Code & Daytime Tele	phone Number
Enclosed is a check for the following amount made payable to the Florida Departs	ment of State:
\$\frac{1}{12}\$35 Filing Fee \times \text{Certificate of Status} \tag{\$\frac{1}{12}\$	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation, with the Florida Dept. of State) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida 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," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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: New Registered Office Address: (Florida street address) Florida (Citv) (Zip Code)

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)

Title	Name THOMAS Winford	Address	Type of Action
<u>V.1</u>	THOMAS WINTOIG	1306 SW 43rdS CAPE CORALFL 3	1
			_
·			
	ding or adding additional Articles, ente dditional sheets, if necessary). (Be spec		
provisi	mendment provides for an exchange, reons for implementing the amendment in applicable, indicate N/A)	classification, or cancellation of in a contained in the amendment	ssued shares, titself:
· ····································	<u>,</u>		

The date of each amendment	(s) adoption:			
Effective date if applicable:	(date of adoption is required)			
(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.			
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):			
"The number of votes	cast for the amendment(s) was/were sufficient for approval			
by				
•	(voting group)			
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder			
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder			
Dated	-28-2010			
sele	a director, president or other officer – if directors or officers have not been seted, by an incorporator – if in the hands of a receiver, trustee, or other court			
app	ointed fiduciary by that fiduciary)			
	Tessie Les Daves (Typed or printed name of person signing)			
	DIRECTORS President			
	(True or berson struck)			