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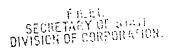
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# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LEO & LEC	ENTERPRISE	INC
DOCUMENT NUMI	BER: P1500002323	6	
	of Amendment and fee are sul		
Please return all corres	spondence concerning this mat	ter to the following:	
	Paulina Seppane	n	
		Name of Contact Person	ı
	Michael J McGoe	у СРА	
		Firm/ Company	
	639 E Ocean Ave	Ste 101	
		Address	
	Boynton Beach, F	FL 33435	
		City/ State and Zip Code	•
сра	amjm@aol.com		
<del></del>	. —	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	e call:	
Paulina Sepp	panen	<sub>at (</sub> 561	734-8599
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301

### Articles of Amendment to Articles of Incorporation of



15 MAR 20 AH 11: 24

## LEO & LEO ENTERPRISE INC

(Name of Corporation as currently filed with the Fl	orida Dept. of State)
P15000023236	<del></del>
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Mutual address MALDE ATOST OFFICE BOX)	
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address: (City)	, Florida (Zip Code)
(City)	(Zip Gode)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	oith and accept the obligations of the position.
Thereby weeeps the appointment as registered agent. I am junitual to	
Signature of New Registered A	gent, 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	<u>PT</u>	John Doe					
X Remove	<u>V</u>	Mike Jones					
X Add	<u>sv</u>	Sally Smith					
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s				
1) Change	Р	TEARA NICOLE WEAL	6266 SOUTH CONGRESS				
Add			LAKE WORTH, FL 33462				
Remove							
2) Change	VP	BOB CEUS	6266 SOUTH CONGRESS				
Add			LAKE WORTH, FL 33462				
Remove							
3) Change							
Add							
_ Remove			<del></del>				
4) Change							
Add							
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f an ar	nendment proions for imple	ovides for a	n exchange.	<u>reclassifica</u>	tion, or canc	ellation of is	sued shares.	
provis	<mark>ions for impl</mark> not applicabl	ementing th	<u>ie amendme</u> V/A )	nt if not con	tained in the	amendment	itself:	
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The date of each amendment(s) adoption:  $\underline{03/10/15}$ , if other than the date this document was signed. 15 MAR 20 AH 11: 24 Effective date if applicable: (no more than 90 days after amendment file date) (CHECK ONE) Adoption of Amendment(s) The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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 (voting group) The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) **TEARA NICOLE WEA;** (Typed or printed name of person signing) PRESIDENT (Title of person signing)