# P15000041888

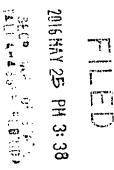
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Amend

MAY 27 2016

I ALBRITTON

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: LECA	R INVESTMENTS	INC	
DOCUMENT NUMBER: P15000047	'888		
The enclosed Articles of Amendment as		or filing.	
Please return all correspondence concer	ning this matter to the	following:	
JUAN F. RAMIS	REZ		
<del></del>	Name	of Contact Person	I
LECAR INVEST	MENTS INC		
	F	irm/ Company	
5460 HOFFNER	AVE SUITE 402		
		Address	
ORLANDO FL	32812		
	City/	State and Zip Code	2
lecarinvestmentsinc@g	mail.com		
É-mail addre	ess: (to be used for fu	ture annual report	notification)
For further information concerning this	matter, please call;		
Juan F. Ramirez		407 at (	) 384-2682 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the following an	nount made payable t	o the Florida Depa	rtment of State:
\$35 Filing Fee \$43.75 Fil Certificate	of Status Cert (Add	75 Filing Fee & ified Copy litional copy is osed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3231		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

#### LECAR INVESTMENTS INC

(Name	of Corporation as curren	tly filed with the Florida Dept. of Stat	e)
P15000047888		try mod with the Fiorida popular state	5
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the	following amendment(s)
A. If amending name, enter the new na	ame of the corporation:		
NONE			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corporation nar	or the abbreviation
P. Entar naw principal office address	if applicables	N/A	
B. Enter new principal office address, (Principal office address MUST BE A S			· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if appli		N/A	
(Mailing address MAY BE A POST)	OFFICE BOX)	11/21	
			72 28
			n n
D. If amending the registered agent an new registered agent and/or the new			
	N/A	551.	[c. ] O
Name of New Registered Agent			PH 3: 38
	(Florida s	treet address)	
New Registered Office Address:	N/A	, Florida	<u> </u>
		(City)	(Zip Code)
		<b></b>	•
New Registered Agent's Signature, if c I hereby accept the appointment as regist			nosition
Thereby decept me appointment as regard	erea agem. Tam jamma	with that teeeps the obligations by the p	osmon.
			<u>-</u>
	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	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	Directo	or	JUAN F. RAMIREZ	5460 HOFFNER AVE 402
XX Add				ORLANDO, FL 32812
Remove				
2) Change		_		
Add				
Remove				<del></del>
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove			•	•
5) Change				
Add				
Remove				<u> </u>
6) Change				
Add				
Remove				

(, manners, me sinesso, y necessory).	cles, enter change(s) here: (Be specific)
/A	
	•
,	
•	
TP 1	ange, reclassification, or cancellation of issued shares,
II an amendment provides for an exch	
provisions for implementing the amer	ndment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
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provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

05/23/2016	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
05/23/2016 Effective date <u>if applicable</u> :	
(no more than 90 a	lays after amendment file date)
Note: If the date inserted in this block does not meet the applicab document's effective date on the Department of State's records.	le statutory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The moby the shareholders was/were sufficient for approval.	umber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to vot	
"The number of votes cast for the amendment(s) was/were s	sufficient for approval
by(voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors wi action was not required.	thout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators withou action was not required.	t shareholder action and shareholder
Dated 05-23-2016 Signature X / 66	
(By a director, president or other officer	- if directors or officers have not been
, , , , , , , , , , , , , , , , , , ,	ands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	, ,
LUIS CARVAT	AL
(Typed or printed nar	ne of person signing)
PRESIDEN	au
(Title of	person signing)