

2/6 0000 56930

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

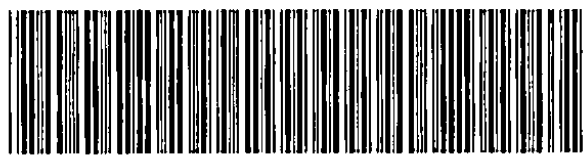
(Business Entity Name)

(Document Number)

Additional Copies _____ Certificates of Status _____

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FILED
2019 DEC 19 AM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

13 2020
ALBRITTON

COVER LETTER

: Amendment Section
Division of Corporations

NAME OF CORPORATION: LEBON COUNTY WIDE SERVICES INC.

DOCUMENT NUMBER: P16000056930

: enclosed *Articles of Amendment* and fee are submitted for filing.

ase return all correspondence concerning this matter to the following:

SONEL LEBON

Name of Contact Person

N/A

Firm/ Company

2413 NW 39TH TER APT 102

Address

LAUDERDALE LAKES FL 33311

City/ State and Zip Code

E-mail address: (to be used for future annual report notification)

r further information concerning this matter, please call:

Name of Contact Person at (Area Code & Daytime Telephone Number)

nclosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address

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

Street Address

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

LEBON COUNTY WIDE SERVICES INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

PI6000056930

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

Amending name, enter the new name of the corporation:

n/a The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "professional," "professional association," or the abbreviation "P.A."

Enter new principal office address, if applicable:

Principal office address MUST BE A STREET ADDRESS

4551 NW 40TH ST

LAUDERDALE LAKES

FL 33319

Enter new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX

2413 NW 39TH TER APT 102

LAUDERDALE LAKES FL 33311

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

SONEL LEBON

2413 NW 39TH TER APT 102

(Florida street address)

New Registered Office Address:

LAUDERDALE LAKES

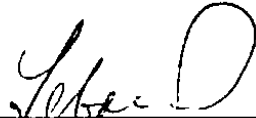
(City)

Florida 33311

(Zip Code)

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

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. For example, 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:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

of Action (Check One)	Title	Name	Address
<input type="checkbox"/> Change	VP	AMOSE LEBON SAINT MELUS	2413 NW 39TH TER APT 102
<input type="checkbox"/> Add			LAUDERDALE LAKES
<input type="checkbox"/> Remove			FL 33311
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)



Page 3 of 4

Effective date if applicable: 12/17/2019
(no more than 90 days after amendment file date)

: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
ment's effective date on the Department of State's records.

tion of Amendment(s) **(CHECK ONE)**

ne amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)
y the shareholders was/were sufficient for approval.

ne 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):*

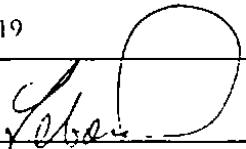
"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

ne amendment(s) was/were adopted by the board of directors without shareholder action and shareholder
tion was not required.

ne amendment(s) was/were adopted by the incorporators without shareholder action and shareholder
tion was not required.

Dated 12/17/2019

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)

SONEL LEBON

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)