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| (Re                     | equestor's Name)   |           |
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| PICK-UP                 | MAIT               | MAIL      |
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| (Bu                     | siness Entity Nan  | ne)       |
|                         |                    |           |
| (Do                     | cument Number)     |           |
|                         |                    |           |
| Certified Copies        | Certificates       | of Status |
|                         |                    |           |
| Special Instructions to | Filing Officer:    |           |
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SECRETARY OF STATE OIVISION OF CORPORATION.

UN 0 2 2017 C MCNAIR

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

|   |                     | <del></del> | 4        | _                              |                |
|---|---------------------|-------------|----------|--------------------------------|----------------|
| LEUF OF FLORIDA                                       | A INC.              |             |          | <b>1</b>                       | ORFORAL WAS BO |
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|   |                     |             |          |                                |                |
|   |                     |             | <u></u>  |                                |                |
|   |                     |             |          | Art of Inc. File               |                |
|   |                     |             | 1        | LTD Partnership File           |                |
|   |                     |             |          | Foreign Corp. File             |                |
|   |                     |             |          | L.C. File                      |                |
|   |                     |             |          | Fictitious Name File           |                |
|   |                     |             |          | Trade/Service Mark             |                |
| •   |                     |             |          | Merger File                    |                |
|   |                     |             | 1        | Art, of Amend, File            |                |
|   |                     |             |          | RA Resignation                 |                |
|   |                     |             |          | Dissolution / Withdrawal       |                |
|   |                     |             |          | Annual Report / Reinstatement  |                |
|   |                     |             |          | Cert. Copy                     |                |
|   |                     |             | <u>√</u> | Photo Copy                     |                |
|   | •                   |             |          | Certificate of Good Standing   |                |
|   |                     |             |          | Certificate of Status          |                |
|   |                     |             |          | Certificate of Fictitious Name | =              |
|   |                     |             |          | Corp Record Search             |                |
|   |                     |             |          | Officer Search                 |                |
|   |                     |             |          | Fictitious Search              |                |
| Signature   | <u> </u>            |             |          | Fictitious Owner Search        |                |
| o.gu.u.u  |                     |             |          | Vehicle Search                 |                |
|   |                     |             |          | Driving Record                 |                |
| Requested by: SETH                                    | 6/1/17              |             |          | UCC 1 or 3 File                |                |
| Name  | $-\frac{6/1/17}{2}$ | Time        |          | UCC 11 Search                  |                |
| Maile   | Date                | Time        |          | UCC 11 Retrieval               |                |
| Walk-In 174 Pender's Printing - Thom leville, GA 8/00 | Will Pick Up        |             |          | Courier                        |                |

## **COVER LETTER**

TO: Amendment Section Division of Corporations LEUF OF FLORIDA INC NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: WILLIAM GEMMELL Name of Contact Person LEUF OF FLORIDA INC Firm/ Company 4400 NORTH FEDERAL HWY SUITE #408 Address **BOCA RATON FLORIDA 33431** City/ State and Zip Code BOBBYSUNSHINESTATE@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561 ) 617-1130

Area Code & Daytime Telephone Number WILLIAM GEMMELL Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



LEUF OF FLORIDA INC

| on (if known)   |
|---|
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| · · · · · · · · · · · · · · · · · · ·   |
| At Annual and a second and a contract of the second and a second a second and a second a second and a second |
| ofit. Corporation adopts the following amendment(s) to  |
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| The new   |
| any," or "incorporated" or the abbreviation rofessional corporation name must contain the   |
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| rida, enter the name of the   |
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| , Florida   |
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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             | PT        | John Doe        |                        |
|-------------------------------|-----------|-----------------|------------------------|
| X Remove                      | <u>v</u>  | Mike Jones      |                        |
| X Add                         | <u>sv</u> | Sally Smith     |                        |
| Type of Action<br>(Check One) | Title     | <u>Name</u>     | Address                |
| 1) Change                     | P         | KARYNE BAZZANO  | 4400 NORTH FEDERAL HWY |
| Add X Remove                  |           |                 | BOCA RATON FL 33431    |
| 2) Change                     | S         | CLIVE KABATZNIK | 4400 NORTH FEDERAL HWY |
| Add                           |           |                 | BOCA RATON FL 33431    |
| X Remove 3) Change            | P/S       | WILLIAM GEMMELL | 4400 NORTH FEDERAL HWY |
| _ <b>_</b> Add                |           |                 | BOCA RATON FL 33431    |
| Remove                        |           |                 |                        |
| 4) Change                     |           |                 |                        |
| Add                           |           |                 |                        |
| Remove                        |           |                 |                        |
| 5) Change                     |           |                 |                        |
| Add                           |           |                 |                        |
| Remove                        |           |                 |                        |
| 6) Change                     |           |                 |                        |
| Add                           |           |                 |                        |
| Remove                        |           |                 |                        |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)  |  |  |  |  |
|--|--|--|--|--|
| THE ORIGINAL OFFICERS ARE BEING REMOVED FROM THE CORPORATION AND MR. WILLIAM GEMMELL   |  |  |  |  |
| S'BEING ADDED AS THE PRESIDENT. THERE ARE NO OTHER CHANGES.  |  |  |  |  |
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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: |  |  |  |  |
| (if not applicable, indicate N/A)  |  |  |  |  |
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|  | MAY 31, 2017   |                         |
|--|--|-------------------------|
| The date of each amendmen                                  |  | , if other than the     |
| date this document was signed                              | d.   |                         |
|  | MAY 31, 2017   |                         |
| Effective date <u>if applicable</u> :                      | (no more than 90 days after amendment file date)   |                         |
| Note: If the date inserted in document's effective date on | this block does not meet the applicable statutory filing requirements, this date will the Department of State's records.                                   | ll not be listed as the |
| Adoption of Amendment(s)                                   | (CHECK ONE)  |                         |
|  | ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.   |                         |
|  | ere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s): |                         |
| "The number of vote  | es cast for the amendment(s) was/were sufficient for approval  |                         |
| by   | ,"   |                         |
|  | (voting group)   |                         |
| ☐ The amendment(s) was/w action was not required.          | ere adopted by the board of directors without shareholder action and shareholder   |                         |
| The amendment(s) was/w action was not required.            | ere adopted by the incorporators without shareholder action and shareholder  |                         |
| Dated  | MAY 31, 2017   |                         |
| Signature  | William Terroll  |                         |
|  | 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)   |                         |
|  | WILLIAM GEMMELL  |                         |
| ξ.   | (Typed or printed name of person signing)  |                         |
|  | PRESIDENT  |                         |
|  | (Title of person signing)  |                         |