P11000034903

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(Address)		
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(City/State/2	Zip/Phone #)	
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(Business E	Entity Name)	
(Document	Number)	
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If there are any issues
please contact Cheyanne at
850-202-1882

Date:	02/03/2025		
	Cheyanne Davis	<u> </u>	
	2684196		
	L. A.	LEYRA INC.	
☐ Article	s of Incorporation/Authorizatio	n to Transact Business	
✓ Ameno	dment		
☐ Chang	ge of Agent		
Reinst	tatement		
☐ Conve	ersion		
☐ Merge	er.		
☐ Dissolution/Withdrawal			
Fictitio	ous Name		
✓ Other_	PLEASE ATTA	CH CERT. COPY UPON FILING	
Authorized Ar Signature:	mount: \$43.75		



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088
If there are any issues
please contact Patrice at
850-202-9071

Date:	02/03/2025	
Name:	Cheyanne Davis	_
Reference #	2684196	_
	E. A. L	EYRA INC.
	es of Incorporation/Authorization	
✓ Amer	ndment	
Char	nge of Agent	
Rein:	statement	
Conv	version	
☐ Merg	er	
Disso	olution/Withdrawal	
☐ Fictiti	ious Name	
✓ Othe	PLEASE ATTAC	CERT. COPY UPON FILING
Authorized /	Amount: \$43.75	<u></u>
Signature: _	Unyme Paire	

COVER LETTER

Division of Corporation	S		
NAME OF CORPORATIO	N:Castleway Ins	surance Inc.	
DOCUMENT NUMBER: _	P1700003690	3	
The enclosed Articles of Ame	endment and fee are su	bmitted for filing.	
Please return all corresponder	nce concerning this ma	tter to the following:	
	Milena Vorndr	an	
		Name of Contact Person	n
	Bons, Schoene	eck & King, PLLC	
		Firm/ Company	
	200 Delaware	Ave., Suite 900	
Address			
	Buffalo, NY 14	1202	
 .		City/ State and Zip Cod	
			· · · · · · · · · · · · · · · · · · ·
b	-mail address: (to be us	sed for future annual report	notification)
For further information conce	erning this matter, pleas	se call;	
Milena Vorndran)_416-7065
Name of Cont	act Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	llowing amount made	payable to the Florida Dep	artment of State:
~	\$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 Ac			Address
Amendment Section Division of Corporations P.O. Box 6327			Iment Section
			on of Corporations entre of Tallahassee
Tallahassee			N. Monroe Street, Suite 810
	,		assec, FL 32303

Articles of Amendment to Articles of Incorporation of FILED 2025 MAR -5 PM 1: 37

Castleway Insurance Inc. (Name of Corporation as currently filed with the Florida D	
(Name of Corporation as currently flied with the Florida E	
	Dept. of State)
P17000036903	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation its Articles of Incorporation:	n adopts the following amendment(
A. If amending name, enter the new name of the corporation:	
L. A. Leyra Inc.	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporate "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation "chartered," "professional association," or the abbreviation "P.A."	ed" or the abbreviation "Corp.,"
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 new registered office address:	name of the
new registered agent and/or the new registered office address.	
Name of New Registered Agent	·
(Florida street address)	
New Registered Office Address: (City)	, Florida (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 obligat	tions of the position.
Signature of New Registered Agent, if changing	10

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

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)	Title	Name	<u>Addres</u> s
l)Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		- V-21-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
Add			
Remove			
5) Change			
Add			
Remove			
Change			
Add			
Add			, , , , , , , , , , , , , , , , , , ,
KCHIOVE			

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nicaen <i>aaai</i>	z or adding additional Articles, enter change(s) here: tional sheets, if necessary). (Be specific)	
		_
	<u> </u>	
-		
<u>f an amenç</u>	iment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions (if not	for Implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)	
(y nor	appricable, indicate (1771)	

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The date of each amendment(s) adoption: _	November 19, 2024	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date	:)
Note: If the date inserted in this block does a document's effective date on the Department of	not meet the applicable statutory filing requirement f State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by the action was not required.	incorporators, or board of directors without sharel	holder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the an approval.	nendment(s)
	ne sharcholders through voting groups. The following group entitled to vote separately on the amendme	•
"The number of votes cast for the ame	indment(s) was/were sufficient for approval	
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(vo	ling group)	
Dated November 19, 2024 Signature Signature	sident or other officer – if directors or officers have	
	or other officer - if directors or officers have or porator - if in the hands of a receiver, trustee, or	
	y by that fiduciary)	
Leyra Heri	nandez	
	(Typed or printed name of person signing)	
President		
	(Title of person signing)	