## P180000 61117

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: LEANEZ INTERN	NATIONAL INC				
	HBER: P18000061117					
	es of Amendment and fee are su	ibmitted for filing.				
Please return all cor	respondence concerning this ma	itter to the following:				
	LUIS RENDON ESPINOZA					
	Name of Contact Person					
	LEANEZ INTERNATIONAL INC					
		Firm/ Company				
	5920 W SAMPLE RD APT, 307					
		Address				
	CORAL SPRINGS, FL 3306	7				
		City/ State and Zip Cod	e			
	luisrendon827@gmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informat	ion concerning this matter, plea.	se call:				
LUIS RENDON ESPINOZA		at (561)	774-7893			
Name of Contact Person		at ((561) ) 774-7893  Area Code & Daytime Telephone Number				
Enclosed is a check	for the following amount made	payable to the Florida Depa	urtment of State:			
S35 Filing Fee	□843.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

LEANEZ INTERNATIONAL INC

P18000061117	orporation as curre	itly filed with the Florida Dept. of State)	
		*	٠,٠.
	/Doggovant Number	of Corporation (if known)	
	(170cament Number	or corporation (ii known)	
Pursuant to the provisions of section 607,100 its Articles of Incorporation:	6, Florida Statutes, th	is Florida Profit Corporation adopts the following amo	ındmei
A. If amending name, enter the new name	of the corporation:		
N/A		$Th_{C}$	ием
	o, " "Inc, " or "Co".	"company," or "incorporated" or the abbreviation "C. A professional corporation name must contain the	orp "
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		5920 W SAMPLE RD APT 307	
		CORAL SPRINGS, FL 33067	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5920 W SAMPLE RD APT 307	
		CORAL SPRINGS, FL 33067	
D. If amending the registered agent and/o new registered agent and/or the new re			
Name of New Registered Agent	<u> </u>		
593	20 W SAMPLE RD A	PT 307	
		street address)	
New Registered Office Address:	DRAL SPRINGS	, Florida	
		(City) (Zip Code)	

☐ 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	PT	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>	Address
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove 3 ) Change			- <u>-</u>
Add			
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)
N/A
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)
N/A

The date of each amendment(s) adoption:	, if other than the
date this document was signed.  AUGUST 11, 2020	
Effective date if applicable:	
(no more than 90 days after amen	dment file date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory fill document's effective date on the Department of State's records.	ing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors action was not required.	without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes by the shareholders was/were sufficient for approval.	cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting group must be separately provided for each voting group entitled to vote separately or	
"The number of votes cast for the amendment(s) was/were sufficient for a	pproval
by	·
(voting group)	
AUGUST 11, 2020 Dated Signature	
(By a director, president or other officer – if directors of selected, by an incorporator – if in the hands of a recei-appointed fiduciary by that fiduciary)	
LUIS A RENDON ESPINOZA	
(Typed or printed name of person si	gning)
PRESIDENT	
(Title of person signing)	