P 190000 74820

	(Requestor's Name)		
—	(Address)		
	(Address)		
	(City/State/Zip/Phone #)		
	PICK-UP WAIT MAIL		
	(Business Entity Name)		
	(Document Number)		
Certii	fied Copies Certificates of Status		
Special Instructions to Filing Officer:			





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N: LEENA F&B INC				
DOCUMENT NUMBER: _	°19000074820				
The enclosed Articles of Amo	endment and fee are su	bmitted for filing.			
Please return all corresponde	nce concerning this ma	tter to the following:			
		MOHAMED GHARSALI	J.		
		Name of Contact Persor	1		
	LEENA F&B INC.				
	-	Firm/ Company			
		815 N. 14TH ST			
	Address				
	LEESBURG, FL 34748				
	City/ State and Zip Code				
For further information conce	erning this matter, pleas		848-2731		
Name of Cont		at ()		
Enclosed is a check for the fe			,		
■ \$35 Filling Fee □	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fifing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing A			Address		
Amendmen			ment Section		
Division of P.O. Box 6	Corporations		n of Corporations Building		
Tallahassee, FL 32314		2661 Executive Center Circle			
		Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of

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	LEENA F&B INC.
(Name of Corporation	n as currently filed with the Florida Dept. of State)
	P19000074820
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida 3 its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	RESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	·
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address.	, Florida
	(City) (Zsp Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept the obligations of the position.
Signal	ture of New Registered Agent, if changing
igmi.	me of the a reference vicent a constant

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>PΤ</u>	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change	VP	SAMIR LAYEB	3108 1st ST	
X Add			BRANDENTON, FL 34208	
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add	<u> </u>			
•				
Remove				

Attach additional sheets, if necessary).	(Be specific)
	
	
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provisions for implementing the amer	range, reclassification, or cancellation of issued shares, induced in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 10/22/2019	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wildocument's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☑ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	
Dated_10/22/2019	
10	
Signature Maria	
(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)	
MOHAMED GHARSALLI	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	