

PZO 0000009866

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(Document Number)

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02/18/20--01022--006 **35.00

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2020 MAY -4 PM 2:31

Amend

MAY 06 2020

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LEON PROPERTY SOLUTIONS, INC

DOCUMENT NUMBER: P20000009866

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

Please return all correspondence concerning this matter to the following:

LAZARO LEON QUINONES
Name of Contact Person
LEON PROPERTY SOLUTIONS, INC
Firm/ Company
6149 SW 25TH STREET
Address
MIRAMAR, FL 33023
City/ State and Zip Code
leonlazar0849@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAZARO LEON QUINONES at (305) 244-4446
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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



REC-111

2020 MAY -4 PM 12:30

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 11, 2020

LAZARO LEON QUIONES
6149 SW 25TH STREET
MIRAMAR, FL 33023

SUBJECT: LEON PROPERTY SOLUTIONS INC
Ref. Number: P20000009866

*SEE ATTACHED
CORRECTION*

We have received your document for LEON PROPERTY SOLUTIONS INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Aibritton
Regulatory Specialist II

Letter Number: 720A00005424

Articles of Amendment
to
Articles of Incorporation
of

LEON PROPERTY SOLUTIONS, INC

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

P20000009866

(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:

A. If amending name, enter the new name of the corporation:

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

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

6149 SW 25th STREET

MIRAMAR, FL 33023

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 name of the new registered agent and/or the new registered office address:

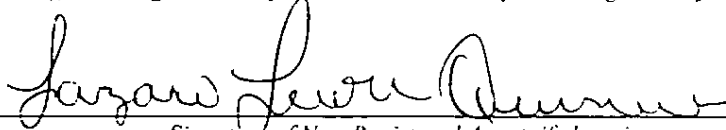
Name of New Registered Agent LAZARO LEON QUINONES

(Florida street address)

New Registered Office Address: 6149 SW 25TH STREET MIRAMAR, Florida 33023
(City) (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 obligations of the position.



Signature of New Registered Agent, if changing

Check if applicable

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

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	PT	LAZARO LEON	17170 NW 40TH AVE
<input type="checkbox"/> Add			MIAMI GARDENS, FL 33055
<input checked="" type="checkbox"/> Remove			6149 SW 25TH STREET
2) <input type="checkbox"/> Change	PT	LAZARO LEON QUINONES	MIRAMAR, FL 33023
<input checked="" type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings on the paper.

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)

[illegible]

02/12/2020

The date of each amendment(s) adoption: _____, 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 not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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)

02/12/20
Dated _____

Signature Lazaro Leon Quinones
(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)

LAZARO LEON QUINONES

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)