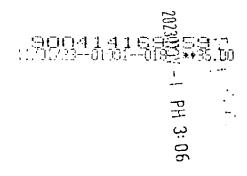
## P 20 0000 (8500)

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CO	RPORA	TION: LEBED GROUP C	ORP	
		R: P20000088300		
The enclosed A	rticles of	**Amendment and fee are su	bmitted for filing.	
Please return all	l correspo	ondence concerning this ma	tter to the following:	
GLORIA D BEDOYA				
			Name of Contact Persor	1
LEBED GROUP CORP				
	_		Firm/ Company	
7500 NW 25TH ST SUITE 237				
	_		Address	
	D	ORAL, FL 33122		
	_	·	City/ State and Zip Code	2
	IN	FO@JCBSOLUTIONSING	C.NET	
	_	E-mail address: (to be us	sed for future annual report	notification)
For further info		concerning this matter, pleas		296-1833
	Name of	Contact Person	at ( Area Co	) 296-1833 de & Daytime Telephone Number
Enclosed is a ch	neck for t	he following amount made		
S35 Filing	Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$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		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ntly filed with the Florida Dept.	of State)
P20000088300		
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation add	opts the following amendment(s
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.,	A professional corporation na	or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	7500 NW 25TH ST	<u> </u>
(Principal office address MUST BE A STREET ADDRESS )	SUITE 237	-0 '.
	DORAL, FL 33122	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7500 NW 25TH ST	96
	SUITE 237	
	DORAL, FL 33122	
D. If amending the registered agent and/or registered office at new registered agent and/or the new registered office address.		e of the
Name of New Registered Agent		
(Florida	street address)	<u> </u>
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		of the position.
Signature of New	Registered Agent, if changing	
Charle if anniquable		

<sup>☐</sup> 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)

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> <u>Joh</u>	in Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	VP	GLORIA D BEDOYA	3900 BISCAYNE BLVD 613
Add			MIAMI, FL 33137
Remove			
2) Change	P	OSCAR A. LENOS ALEJALDE	3900 BISCAYNE BLVD 613
X Add			MIAMI. FL 33137
Remove Change			
Add			
Remove			<del></del>
4) Change		<del> </del>	
Add			
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If ame</u> (Attach	nding or adding additional Art additional sheets, if necessary).	icles, enter change(s (Be specific)	s) here:		
			· · ·		
			Par 45		
		-			
			-		
		<u> </u>			
		•			
		-			
<u>provi</u>	mendment provides for an exc sions for implementing the amount if not applicable, indicate N/A)	hange, reclassificati endment if not conta	ion, or cancellatio ained in the amen	n of issued shares dment itself:	1
		-	<del></del>		

.

The date of each amendment(s) ado date this document was signed.	ption:, if other than the
Effective date if applicable:	
<u></u>	(no more than 90 days after amendment file date)
Note: If the date inserted in this bloc document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date will not be listed as the rtment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
■ The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):
	the amendment(s) was/were sufficient for approval
by	
	(voting group)
Dated 11/1/2	<del></del>
Signature OD	ig Bedova
(By a dire selected, l	etor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
GI	ORIA D BEDOYA
	(Typed or printed name of person signing)
PF	ESIDENT
-	(Title of person signing)