P25000044582

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S. PRATHER

COVER LETTER

NAME OF CORPORATION:

LEON Promier Insulance Corp.

DOCUMENT NUMBER:

Pasougo 4453a

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

Please return all correspondence concerning this matter to the following:

Implication

Name of Contact Person

Fittin/ Company

Po Box 441154

Address

Might 17. 33194

City/ State and Zip Code

Impact Ocasio Degrate Com

E-mail address: (to be used for future annual report nonification)

For further information concerning this matter, please call;

TO: Amendment Section

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

(Additional Copy is enclosed)

Articles of Amendment	
to .	> 2
Articles of Incorporation of	124
Lean Promier Insuiance Con	2024 JUL All
(Name of Corporation as currently filed with the Florida Dept. of State)	<u> </u>
P330000 44582 (Document Number of Corporation (if known)	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the foits Articles of Incorporation: A. <u>If amending name, enter the new name of the corporation:</u>	ollowing amendmefifs) to
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbit "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	contain the word
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Po Box 941194 Micani, Fo. 5	
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 Imabel Ocasio	
11735 Du 147+ Aux. Uni (Florida street address)	4 9 4
New Registered Office Address: Macan (Circ) (Circ)	

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.

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)

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: <u>X</u> Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
	_ <u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Guillamo Sondon Mukalano	<u>Addres</u> s
1) Change	CEC		11735 SW 1477 Ax
X Add			<u>un + 34</u>
Remove			Micon F. 33194
2) Change		<u> </u>	
Add			
Remove Change			
Add			
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4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	· · · · · · · · · · · · · · · · · · ·
Add			
Remove			

E. If amending or adding additional Articles, ent (Attach additional sheets, if necessary). (Be sp	ter change(s) here: ec(fic)
F. If an amendment provides for an exchange, ro	eclassification, or cancellation of issued shares,
provisions for implementing the amendment (if not applicable, indicate N/A)	if not contained in the amendment usell:

The date of each amendmedate this document was sign		, if other than th
Effective date <u>if applicable</u>	/0127124	
	n this block does not meet the applicable statutory filing requirements, this date win the Department of State's records.	ll not be listed as th
Adoption of Amendment() (<u>CHECK ONE)</u>	
The amendment(s) was/v action was not required.	were adopted by the incorporators, or board of directors without shareholder action an	d shareholder
	were adopted by the shareholders. The number of votes east for the amendment(s) //were sufficient for approval.	
	vere approved by the shareholders through voting groups. The following statement ideal for each voting group entitled to vote separately on the amendment(s):	
	tes east for the amendment(s) was/were sufficient for approval	
by	(voting group)	y-
Dated Signature	6133124 HAL	024 JUL 1 O
· ·	(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)	AT 7: 38
	Tuar Pablo Lea Sanche3 (Typed or printed name of person signing)	
	Prender +	
	(Title of person signing)	