

From:

To: (850)617-6380

09/12/2020 03:25 #148 P.001

**P23000064443**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(shown below) on the top and bottom of all pages of the document.

((H230003203423)))



H230003203423ABCT

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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : ACOSTA ESTEVEZ PROFESSIONAL SERVICES  
Account Number : I20230000138  
Phone : (305)592-5240  
Fax Number : (305)592-5535

\*\*Enter the email address for this business entity to be used for future  
annual report mailings. Enter only one email address please.\*\*

Email Address: acostaesteveracct@gmail.com

2023 SEP 12 AM 9:46  
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DIVISION OF CORPORATIONS  
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TALLAHASSEE, FL

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
LEAS SERVICES & CONSTRUCTION CORP**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$35.00 |

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From:

To: 8506176380

09/12/2023 03:26 #148 P.003

H230003203423

COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** LEAS SERVICES & CONSTRUCTION CORP

**DOCUMENT NUMBER:** P23000064443

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

Please return all correspondence concerning this matter to the following:

FERNANDO SABINA

Name of Contact Person

ACOSTA ESTEVEZ PROFESSIONAL SERVICES

Firm/ Company

7500 NW 25TH ST STE 111

Address

MIAMI, FL 33122

City/ State and Zip Code

acostaestvezacct@gmail.com

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

FLORIDA DIVISION  
OF CORPORATIONS  
TALLAHASSEE, FL

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For further information concerning this matter, please call:

FERNANDO SABINA

at (305) 592-5240

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:

\$35 Filing Fee

\$43.75 Filing Fee &  
Certificate of Status

\$43.75 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

Street Address

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

H230003203423

H230003203423

Articles of Amendment  
to  
Articles of Incorporation  
of

LEAS SERVICES &amp; CONSTRUCTION CORP

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

P23000064443

(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 "Co.," "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)*

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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

*(Florida street address)*

New Registered Office Address:

*(City)*

*Florida*

*(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.

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H230003203423

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 PTD 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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

| Type of Action<br>(Check One) | Title | Name              | Address  |
|-------------------------------|-------|-------------------|--|
| 1) <u>X</u> Change            | VP    | LEANDRO PUPO MORA | 5926 THOMAS ST, UNITE 7<br>HOLLYWOOD, FL 33021 |
| ____ Add                      |       |                   |  |
| ____ Remove                   |       |                   |  |
| 2) ____ Change                |       |                   |  |
| ____ Add                      |       |                   |  |
| ____ Remove                   |       |                   |  |
| 3) ____ Change                |       |                   |  |
| ____ Add                      |       |                   |  |
| ____ Remove                   |       |                   |  |
| 4) ____ Change                |       |                   |  |
| ____ Add                      |       |                   |  |
| ____ Remove                   |       |                   |  |
| 5) ____ Change                |       |                   |  |
| ____ Add                      |       |                   |  |
| ____ Remove                   |       |                   |  |
| 6) ____ Change                |       |                   |  |
| ____ Add                      |       |                   |  |
| ____ Remove                   |       |                   |  |

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09/12/2023 03:27 #148 P.006

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

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

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**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)

14230003203423

From:

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09/12/2023 03:27 #148 P.007

H230003203423

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)

09/12/2023  
Dated \_\_\_\_\_

Signature \_\_\_\_\_

*Asley Perez Hernandez*  
(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)

ASLEY PEREZ HERNANDEZ

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)

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