

STATE OF NEVADA

**BARBARA K. CEGAVSKE**

*Secretary of State*

**KIMBERLEY PERONDI**

*Deputy Secretary  
for Commercial Recordings*



**Commercial Recordings Division**

*202 N. Carson Street  
Carson City, NV 89701-4201  
Telephone (775) 684-5708  
Fax (775) 684-7138*

OFFICE OF THE  
**SECRETARY OF STATE**

James Price  
12707 high bluff dr 200  
San Diego, CA 92130

**Job:C20170626-1349**  
June 26, 2017

**Special Handling Instructions:**

**Charges**

Description	Document Number	Filing Date/Time	Qty	Price	Amount
Amended List	20170273526-95	6/26/2017 12:59:28 PM	1	\$300.00	\$300.00
Total					\$300.00

**Payments**

Type	Description	Amount
Credit	072053 4985071629676163703086	\$300.00
Total		\$300.00

**Credit Balance: \$0.00**

**Job Contents:**

File Stamped Copy(s): 1

James Price  
12707 high bluff dr 200  
San Diego, CA 92130

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS  
LICENSE APPLICATION OF:**

ENTITY NUMBER

LEONE ASSET MANAGEMENT, INC.

E0696992005-6

NAME OF CORPORATION

FOR THE FILING PERIOD OF OCT, 2016 TO OCT, 2017



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An **Officer** must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2. If there are additional officers, attach a list of them to this form.

3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5. Make your check payable to the Secretary of State.

6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A **copy fee of \$2.00 per page** is required for **each additional copy** generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co.

**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

☐ This corporation is a publicly traded corporation. The Central Index Key number is:

☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME ELWOOD JUNOT	TITLE(S) PRESIDENT (OR EQUIVALENT OF)
ADDRESS 1723 COMMERCE AVE 'N'	CITY ST. PETERSBURG
	STATE FL
	ZIP CODE 33716

NAME JAMES PRICE	TITLE(S) SECRETARY (OR EQUIVALENT OF)
ADDRESS 1723 COMMERCE AVE 'N'	CITY ST. PETERSBURG
	STATE FL
	ZIP CODE 33716

NAME JAMES PRICE	TITLE(S) TREASURER (OR EQUIVALENT OF)
ADDRESS 1723 COMMERCE AVE 'N'	CITY ST. PETERSBURG
	STATE FL
	ZIP CODE 33716

NAME ELWOOD JUNOT	TITLE(S) DIRECTOR
ADDRESS 1723 COMMERCE AVE 'N'	CITY ST. PETERSBURG
	STATE FL
	ZIP CODE 33716

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** JAMES M PRICE

Title

CHAIRMAN

Date

6/26/2017 12:59:25 PM

**Signature of Officer or  
Other Authorized Signature**

Nevada Secretary of State List Profit  
Revised: 7-1-15

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS AND DIRECTORS OF:**

ENTITY NUMBER

LEONE ASSET MANAGEMENT, INC.

E0696992005-6

NAME ERIC MADER	TITLE(S) DIRECTOR		
ADDRESS 1723 COMMERCE AVE 'N'	CITY ST. PETERSBURG	STATE FL	ZIP CODE 33716
NAME JAMES PRICE	TITLE(S) DIRECTOR		
ADDRESS 1723 COMMERCE AVE 'N'	CITY ST. PETERSBURG	STATE FL	ZIP CODE 33716
NAME	TITLE(S)		
ADDRESS	CITY	STATE	ZIP CODE
NAME	TITLE(S)		
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