

LIS 0000 16839

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

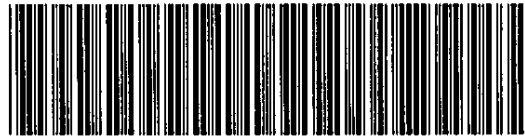
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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157 A 21 AM 8:50
STATE OF ARIZONA
DEPARTMENT OF REVENUE

APR 15 2015

CSC NCH
BG/IFF OTHER

TO: PHYSICAL: Dept. of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING: Dept. of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

FROM: National Corporate Headquarters, Inc.
5605 Riggins Court Suite 200
Reno NV 89502
(800) 638-2320
(775) 329-0852

DATE: Wednesday, March 18, 2015

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

- Articles of Amendment to Articles of Organization
for **LIGHTHOUSE PRINT DESIGN, LLC**

We have included payment in the amount of \$25.00 for the following fees:

- Filing fee

We have included one original and one copy of the Articles.

If there are any questions, please call 800-638-2320

**Please return the file stamped copy of the Articles to the
address below:**

Processing Department
5605 Riggins Court Suite 200
Reno NV 89502

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LIGHTHOUSE PRINT DESIGN, LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Karen Aiazzi

Name of Person

Corporate Service Center

Firm/Company

5605 Riggins Court Suite 200

Address

Reno, Nevada 89502

City/State and Zip Code

processingdepartment@nchinc.com

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

For further information concerning this matter, please call:

Processing Department

Name of Person

at **800 638-2320**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

LIGHTHOUSE PRINT DESIGN, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/28/2015 and assigned Florida document number L15000016839.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1432 Kipling Lane

(Principal office address MUST BE A STREET ADDRESS)

Ponte Vedra, FL 32081

Enter new mailing address, if applicable:

PO Box 2105

(Mailing address MAY BE A POST OFFICE BOX)

St Augustine, FL 32085

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Jesse Wyatt

New Registered Office Address:

1432 Kipling Lane

Enter Florida street address

Ponte Vedra

Florida 32081

City

Zip Code

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Jesse Wyatt
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Jesse Wyatt	PO Box 2105	<input checked="" type="checkbox"/> Add
		Saint Augustine, FL 32085	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated March 18th, 2015

Signature of a member or authorized representative of a member

Jesse Wyatt

Typed or printed name of signer

FILED
MAR 23 2015
TALLAHASSEE, FLORIDA
CLERK OF THE CIRCUIT COURT