10700084131

(Requestor's Name)
(Address)
(Audiess)
(Address)
(Audiess)
(City/State/Zip/Phone #)
(Business Entity Name)
(Business Chilly Name)
(Document Number)
(Execution Notifier)
ified Copies Certificates of Status
ecial Instructions to Filing Officer:
Office Use Only



T

T

ī

08/01/17--010-0--015 **24.00

17 AUS -1 AH 7:36

•

AUG 0 3 2017 J SHIVERS

	COVER LETTER
: Registration Sec Division of Corp	
Liberty High BJECT:	
	Name of Limited Liability Company
	Amendment and fee(s) are submitted for filing. Idence concerning this matter to the following:
	Nina Osbahr
	Name of Person
	Liberty Group
	Firm/Company
	800 S Harbour Island Blvd
	Address
	Tampa, FL 33602

City/State and Zip Code

nosbahr@libertygrouphotels.com

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

further information concerning this matter, please call:

na Osbahr	813 2 at ()	80-2000
Name of Person	Area Code	Daytime Telephone Number

closed 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
ТО
ARTICLES OF ORGANIZATION
OF

¢

_		
	<u> </u>	
ed Liability Compa (A Florida Limited I	<u>ny as it now appears on our</u> Jability Company)	records.)
(
iability Company	were filed on August 16,	2007 and assigned
<u> </u>		
owing:		
<u>f the li</u> mited liab	ility company here:	
ords "Limited Liabil	ity Company," the designation	n "LLC" or the abbreviation "L.L.C."
able:	800 S Harbour Island Bl	vd, Tampa, FL 33602
TADDRESS)		
<u>B()X)</u>	800 S Harbour Island Bl	ivd. Tampa, FL 33602
· ·		ecords, <u>enter the name of the</u>
	·	
800 S Harbour		N N
	Enter Florida street	address GST D
Tampa	I	Florida 33602
-	City	- Zip Code
Registered Agent:		01 2
	iability Company owing: f the limited liab ords "Limited Liabil able: TADDRESS) BOX) for registered of ffice address her 800 S Harbour Tampa	f the limited liability company here: ords "Limited Liability Company," the designation able: 800 S Harbour Island Bl TADDRESS) 800 S Harbour Island Bl BOX) 800 S Harbour Island Bl /or registered office address on our refice address here: 900 S Harbour Island Blvd 800 S Harbour Island Blvd 800 S Harbour Island Blvd

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

If Changing Registered Agent, Signature of New Registered Agent

	rom our records:		
R = Ma R = Au	nager thorized Member		
	Name	Address	Type of Action
	Shah Hospitality Partners LLC	One Tampa City Center Ste 2570	Add
		Tampa, FL 33602	Remove
			Change
	Shah Hospitality Partners LLC	800 South Harbour Island Blvd	🖬 Add
		Tampa, FL 33602	Remove
			Change
			🗆 Add
			Remove
			Change
<u> </u>		i 	🗆 Add
		 	Remove
			Change
			🗆 Add
		······	C Remove
			Change
		- <u></u>	Add
			Remove
			Change

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

	I
• •	1
· · · · · · · · · · · · · · · · · · ·	
	—·
	<u> </u>
	→ 1 AL
	621
	7 AUB - L AH 7: 35 EANASSEE DE LANOA
·	
	,

Effective date, if other than the date of filing:

____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of tiling or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) <u>Note:</u> 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.

the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:) The 90th day after the record is filed.

Dated	JULY	27
		Signature of a member or authorized representative of a member
	Punit Shah	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00