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SECRETARY OF STATE TABLE AHASSEE FLORIDA

J. SAULSBERRY EXAMINER

NO MAR 21 201

COVER LETTER

TÓ:	Division of Co	Section orporations	•			`
SUBJE	ECT:	LIBERTY GROU	OF HOLLYWOOD	LLC		
		Name of Lim	ited Liability Company		_	
The en	closed Articles o	f Amendment and fee(s) are su	bmitted for filing.			
Please	return all corresp	oondence concerning this matter	r to the following:			
		Name of Limited Liability Company ed Articles of Amendment and fee(s) are submitted for filing. rn all correspondence concerning this matter to the following: JOHN DEMARCO				
			Firm/Company		_	
		TE 211	_			
					201 ÎAE	
				0	- ARE	Ú§.
		TAXREC E-mail address: (OVERY@BELLSOUT	H.NET rt notification)	- 101m	i managarian i
For fur	ther information	concerning this matter, please of	call:		AM 9: FESTAT	
	- 1					
Enclose	ed is a check for	the following amount:				
▼ \$25	5.00 Filing Fee		Certified Copy	Certifi closed) Certifi	cate of Status & led Copy	losed)
	Regisi Divisi	tration Section ion of Corporations	Registration Division of C	Section Corporations		

Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LIBERTY GROUP OF				
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	iability Company)	2 24 241 <u>12421 (121</u>)		
The Articles of Organization for this Limited Liability Company	were filed on	06/21/2010	and assi	igned
Florida document numberL1000066039				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	ility company her	<u>e</u> :		
· · · · · · · · · · · · · · · · · · ·		_		
The new name must be distinguishable and end with the words "Limit	ted Liability Compa	ny," the designation "	LLC" or the a	bbreviatic
"L.L.C."				
Enter new principal offices address, if applicable:			,	
(Principal office address MUST BE A STREET ADDRESS)			A SE 20	
			2 8 3	
			ASS	
Enter new mailing address, if applicable:			mi-≺ mio	
(Mailing address MAY BE A POST OFFICE BOX)			F.S.	i
			9:	Wake.
		:	₩ N	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ur records, enter	the name o	f the ne
registered agent and/or the new registered office address here				
Name of New Projectored Agents				
Name of New Registered Agent:				
New Registered Office Address:	E	ter Florida street add	drava	
	Eni	er rioriaa sireet aad	Aress	
	City	, Florida	Zip Code	
	City		zıр соае	

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 608, 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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager MGRM = Managing Member Type of Action Title Address Name -MGRM BEGGS, KENNETH 12232 NW 75TH PL ☐ Add √ Remove PARKLAND, FL 33076 US MONAGHAN, JOHN MGRM 7131 SW 11TH ST √ Add PLANTATION, FL 33317 US ☐ Remove ☐ Add Remove Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ö nature of a member of authorized representative of a member. JAN 26 JOHN DEMARCO Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00