L11000134038

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DIVISION OF CORL CRATICAL

C. LEWIS

MAR 2 1 2013

EXAMINER

TO: · **Registration Section Division of Corporations**

568Luzon 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:

James Haggerty

Name of Person

568Luzon LLC

Firm/Company

507 Columbia Dr

Address

Tampa, FL 33606

City/State and Zip Code

jth7@tampabay.rr.com

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

For further information concerning this matter, please call:

James Haggerty

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)

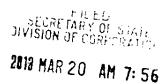
MAILING ADDRESS:

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



568Luzon LLC		
(<u>Name of the Limited Li</u> (A F	iability Company as it now appears on lorida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liab Florida document number <u>L11000134038</u>	oility Company were filed on 11/28/2	2011 and assigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the	he limited liability company here:	
jth architects LLC		
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company,"	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	·	
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		, Florida
	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 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Renae Tvedt	507 Columbia Dr	Add
		Tampa, F 33606	Remove
			Add
			Remove
			— Sylving
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			Remove
			Add
			Remove
			
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if	necessary.)
Operating Agreement, Amendment #1	SECRE FARY OF STATES
	2813 MAR 20 AM 7: 56

March 17 2012 . /	
Dated March 17, 2013	
Signature of a member or authorized representative of a member James Haggerty	
Typed or printed name of signee	

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Filing Fee: \$25.00