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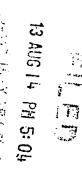
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COVER LETTER

TO: Registration Section Division of Corporations		•	W. Start Start
SUBJECT: Liber	ty Plant:	Tovestwent	S LLC
	Name of Limited Liab	slity Company	
	•		PA
The enclosed Articles of Amendment	and fee(s) are submitted for	or filing.	i di
Please return all correspondence conce	erning this matter to the fo	llowing:	7. S.
	Pani	+R-Shah	
	Na Na	me of Person	
	Liberty	STOUP	
	Fig	rm/Company	N
<u>One</u>	Tampa Co	ty Center, Su	ite 2570
	TampaFi	33602	
***************************************	Kathy @	ate and Zip Code Lubertue for future annual report notification	om
F 6		for future annual report nouncain	un)
For further information concerning this	matter, please call:	0	
Kathy Canu	vels ,	813 280-2	000
Name of Person		Area Code & Daytime Tel	ephone Number
Enclosed is a check for the following a	mount:		
		5.00 Filing Fee &	□\$60.00 Filing Fee,
	icate of Status C	ertified Copy additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRE Registration Section	SS:	STREET/COURIER Registration Section	ADDRESS:
Division of Comores	ione	Division of Comomtion	

P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

· Liberty Plant Inv	restments LCC
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1200003074	were filed on // 1/2 and assigned
This amendment is submitted to amend the following:	9
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words "Limit"L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	One Tampa City Center
(Principal office address MUST BE A STREET ADDRESS)	Suite 2570 J Tampa Fi 33602
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	One Tampa City Center Suite 2570 Tampa Fiz 331602
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	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 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 being added or removed from our records:

MGRM = Managing Member <u>Title</u> <u>Name</u> <u>Address</u> Type of Action Remove Remove Remove Remove Remove

MGR = Manager

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
Dated	July 29 2013
Daica	J Shall
	Signature of a member or authorized representative of a member
	Punit (2 Shah Typed or printed name of signee
	- 1

Page 3 of 3

Filing Fee: \$25.00

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