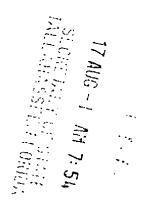
1/2000/36883

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(C	Ocument Number)	
tified Copies	Certificates of	Status
pecial Instructions to	o Filing Officer:	
	Office Use Only	



800301752048

08/01/17--01029--027 **25.00



AUG 0 3 ZG17 J SHIVERS

COVER LETTER

	gistration Secti rision of Corpo				
in areas	Liberty Coral	Investments LLC			
JBJECT:		Name of Limi	ted Liability Company		
ne enclosed	d Articles of Ar	nendment and fee(s) are subi	nitted for filing.		
ease returi	nall correspond	ence concerning this matter t	to the following:		
		Nina Osbahr			_
			Name of Person		
		Liberty Group			
			Firm/Company		
		800 S Harbour Island Blvd			
			Address		_
		Tampa. FL 33602		4 19 19	_
			City/State and Zip Code		
		nosbahr@libertygrouphotels	s.com to be used for future annual re	nort natification)	
			<u> </u>	port notification	
or turther i	ntormation con	cerning this matter, please ca	ill:		
lina Osbah	ır		813 280 at ()	2000	
	Name of P	erson		Daytime Telephone Numb	er .
nclosed is	a check for the	following amount:			
1 \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclo	sed) Certific	Filing Fee, cate of Status & ed Copy al 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

Liberty Coral Investments, LLC					
(Name of the Limit	ed Liability Compar (A Florida Limited L	y as it now appear	s on our records.)	-	
	(A Fiorida Limited L	iaomity Company)			
he Articles of Organization for this Limited L	iability Company	were filed on Oc	tober 26, 2012	and assi	gned
lorida document numberL12000136883	·				
his amendment is submitted to amend the following	owing:				
4. If amending name, enter the new name of	f the limited liabi	lity company he	ere:		
<u> </u>			_		
he new name must be distinguishable and contain the w	1.01 (). 11 ().		min-reion W. I. C. and	ha abbanviation of 1	···
he new name must be distinguishable and contain the w	fords "Limited Liabili	ity Company. the d	esignation LLC or u	ne appreviation 17.1	C.
Enter new principal offices address, if applic	able:	800 S Harbour I	Island Blvd, Tampa,	FL 33602	
Principal office address MUST BE A STREE					
Frincipal office address MOST BLASTREE	T ADDRESSI				
					
Enter new mailing address, if applicable:		800 S Harbour	Island Blvd, Tampa,	FL 33602	
Mailing address MAY BE A POST OFFICE	ROX)	ļ			
maning dualess mai DEA 1 057 01 FFCE	bon				
			-		
B. If amending the registered agent and	•		our records, <u>en</u>	ter the name	of the new
registered agent and/or the new registered of	mce address nere			一 斧約 L	
		ı		70 2	j
Name of New Registered Agent:		<u> </u>		3.5	<u>-</u>
	800 S Harbour l	 cland Rlyd			
New Registered Office Address:		!	rida street address	7 7 3 3 3	
		1.51167 1 101		~~~	
	Tampa		, Florida	33602	
		City 1		Zip Gode	-
New Registered Agent's Signature, if changing	Registered Agent:				
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regionary filed to merely reflect a change in the company has been notified in writing of this	er and complete istered agent as p registered office	performance of provided for in C	^e my duties, and Lo Chapter 605, F.S.	am familiar wit. Or, if this docu	h and ment is

If Changing Registered Agent, Signature of New Registered Agent

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records: IGR = Manager MBR = Authorized Member Name Address **Type of Action** <u>itle</u> PRS1 Investments LLC One Tampa City Center Ste 2570 4GR □ Add Tampa, FL 33602 ■ Remove ☐ Change 4GR PR\$1 Investments LLC 800 South Harbour Island Blvd ■ Add Tampa, FL 33602 □ Remove _□ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change __ □ Add ☐ Remove ☐ Change

1

ending	g any other informat	tion, enter change	e(s) here:	(Attach add 	itional sheets.	if necessa	ry.)	
			<u> </u>	ļ				
								
					•			
					- -			
							NS.	
								_==
							놀림 프린	AJ(
		-					<u>ن</u> در	1
							<u>S </u>	
				1				I2
							5-	7:
				<u> </u>			<u> </u>	- \$0
							;•	
tive da	ite, if other than the	date of filing: 07.	/27/17			_ (optiona	I)	
	date is listed, the date mus date inserted in this blo							
	effective date on the De			ic statutory t	inig requireme	ms. ms an	ic vill lie	n be nated
				!				
cord s	specifies a delayed	d effective date,	but not a	an effectiv	e time, at 1	2:01 a.m	. on th	e earlie
	day after the rece				,			
1	JULY 27		2017	•				
	•		$\overline{Y}\overline{\Lambda}$					
		,	XX	$\sqrt{}$				
_		Signature of a member	enor authoriz	ed representa	ive of a member			
		•	~					
D.	unit Shah				l.			

Page 3 of 3

Filing Fee: \$25.00