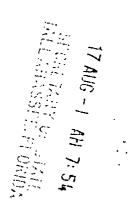
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COVER LETTER

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TID IC	œ.	LHF1 Athe	ens LLC		
UBJE	CI:		Name of Limi	ited Liability Company	
The enc	losed	Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn	all correspo	ondence concerning this matter	to the following:	
			Nina Osbahr		
				Name of Person	
			Liberty Group		,
				Firm/Company	
			800 S Harbour Island Blvd	l l	
				Address	
			Tampa, FL 33602		
				City/State and Zip Code	
			nosbahr@libertygrouphotel	s.com to be used for future annual report r	notification)
For furt	her ir	nformation o	e-man address: (ouncanon)
Nina O	sbahı	-		813 280-2000 at ()	
		Name o	f Person	Area Code Day	time Telephone Number
Enclose	ed is a	check for t	he following amount:	,	
\$25	.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COU Registration Se Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations g Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LHF1 Athens LLC

ompany has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) he Articles of Organization for this Limited Liability Company were filed on May 21, 2014 and assigned lorida document number L14000082601 his amendment is submitted to amend the following: . If amending name, enter the new name of the limited liability company here: he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 800 S Harbour Island Blvd, Tampa, FL 33602 nter new principal offices address, if applicable: Principal office address MU<u>ST BE A STREET ADDRESS)</u> 800 S Harbour Island Blvd, Tampa, FL 33602 nter new mailing address, if applicable: Mailing <u>address MAY BE A POST OFFICE BOX)</u> If amending the registered agent and/or registered office address on our records, enter the name of the new egistered agent and/or the new registered office address here: Name of New Registered Agent: 800 S Harbour Island Blvd New Registered Office Address: Enter Florida street address Tampa lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

eing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

GR = N MBR = A	lanager Authorized Member		
<u>tle</u>	<u>Name</u>	Address	Type of Action
GR ———	LHF1 Manager LLC	201 N Franklin St 2570	Add
		Tampa. FL 33602	■ Remove
			Change
GR	LHF1 Manager LLC	800 South Harbour Island Blvd	■ Add
		Tampa. Fl. 33602	Remove
			Change
			Add
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ve date, if other than the date of filing:	(optional)	
ective date is listed, the date must be specific and cannot be prior to date	of filing or more than 90 days after filing.) Pur	rsuant to 605.0
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ord specifies a delayed effective date, but not an	effective time, at 12:01 a.m. on	the earlie
90th day after the record is filed.		
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Signature of a member or authorized		
Signature of a member or authorized Punit Shah	1	
3	of signee	

Filing Fee: \$25.00