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TO: Amendment Section Division of Corporations

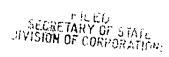
NAME OF CORPORATION:	Liberty Lodge, Inc.				
DOCUMENT NUMBER:	N01000008051				
The enclosed Articles of Amenda	nent and fee are subm	nitted for filing.			
Please return all correspondence	concerning this matter	r to the following:			
		David Cox			
		(Name of Contact Pe	erson)		
		Liberty Lodge, Inc			
(Firm/ Company)					
4235 Mt. Sterling Ave.					
(Address)					
Titusville, Florida 32780					
(City/ State and Zip Code)					
christcentral27@gmail.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning	g this matter, please o	all:			
	Emily Ciardullo	at	321-	267-3646	
(Nan	ne of Contact Person)		(Area Code)	(Daytime Telephone N	lumber)
Enclosed is a check for the follow	ring amount made pay	vable to the Florida [Department of	State:	
	\$43.75 Filing Fee & [Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Addus		£4	4 4 4 4		

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



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(Name of Corporation as curren		ida Dept. of State)
Liberty Lodge,	Inc. N01000008051	
(Document Numb	er of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
	N/A	The new
name must be distinguishable and contain the word "corporal <mark>"Company" or "Co." may not be used in the name</mark> .	ion" or "incorporated	I" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		enter the name of the
N/A		
Name of New Registered Agent:		
4 		
New Registered Office Address:	(FI	orida street address)
	(City)	, Florida (Zip Code)
	(0.0)	(24)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai		the obligations of the position.
Si	gnature of New Regist	ered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:			
X Change	<u>PT</u> <u>John</u>	<u>n Doe</u>	
X Remove		e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	o	Fred Bynum	1495 N. Carpenter Rd.
Add			Titusville, FL 32796
X Remove			
2)Change	ST	Lance Milam	4035 Coquina Ave.
X Add			Titusville, FL 32780
Remove			
3) Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
		,	
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
	•
	
	
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I.P.	e date of each amen	dment(s) adoption:	, if other than th	
date	e this document was:	signed.	HYISION OF CORPORATION	
Effective date if applicable:		July 1, 2016	•	
		(no more than 90 days after amendment file date)	2016 JUL -5 AM 11:27	
		ed in this block does not meet the applicable statutory filing requirement on the Department of State's records.	nts, this date will not be listed as the	
Ad	option of Amendme	nt(s) (CHECK ONE)		
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the for approval.	ne amendment(s)	
	There are no membadopted by the boa	pers or members entitled to vote on the amendment(s). The amendment of directors.	nt(s) was/were	
	Dated	July 1, 2016		
	Signature	Da I Car		
		By the chairman or vice chairman of the board, president or other offi have not been selected, by an incorporator — if in the hands of a receiventher court appointed fiduciary by that fiduciary)		
		David Cox		
		(Typed or printed name of person signing)		
		President Director		
		(Title of person signing)		