## N0200006922

(Re	questor's Name)	
·		
	ldress)	
(Au		
	/	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	■ WAIT	MAIL
(D.		
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
		1
Special Instructions to	Filing Officer:	
		:
ĺ		





700246029827

03/26/13--01022--010 \*\*35.00

13 MAR 26 AM 8: 14 SECRETARY OF THE FALLAHASSEE, FLORIDA

S. HAWKES

APR 2 2013

**EXAMINER** 

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: The Light	House Grov	PUSA INC	
DOCUMENT NUMBER:	. NO20	00006922	
The enclosed Articles of Amendment and fee are subm			
Please return all correspondence concerning this matter	to the following:		
Mark Wilson			
Mark Wilson	Name of Contact Person)		
The Light House Group USA			
16768 NE 5th	(Address)		
North Miami Beach FL 33162 (City/State and Zip Code)			
Lighthouse E-mail address: (to be used i			
For further information concerning this matter, please call:			
Arraven Musgrove (Name of Contact Person)	at (_766	231-4298	
Enclosed is a check for the following amount made pay.			
\$35 Filing Fee \$\Bigcup \square \\$43.75 Filing Fee & Certificate of Status		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section	Street Address Amendment Section		

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

## Articles of Amendment

13 May 26 May 8: 14

•				
•	to			7350 W3.
	Articles of Inco	rporation		~{\J\$\~ <b>~6</b>
	of			14/2
The Light House	Group	USA I	<u>WC</u>	
(Name of Corporation as currently filed with	the Florida <sup>t</sup> De	ot. of State)		1740
N0200000692	2			
(Document Number of	Corporation (if	known)		
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this F	lorida Not For Profi	it Corporation a	dopts the following
A. If amending name, enter the new name of the co	rporation:			
	11/1			
	10/1			The new
name must be distinguishable and contain the word "c	corporation" or	"incorporated" or th	ne abbreviation	"Corp." or "Inc."
"Company" or "Co," may not be used in the name.				
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	<u>:</u> • <u>PRESS</u> )	N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>x</u> )	N/A		· 
D. If amending the registered agent and/or register new registered agent and/or the new registered		ss in Florida, enter	the name of the	2
Name of New Registered Agent:		7		
New Registered Office Address:	(Hiorida si	reet address)		
			Florida	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Reg	istered Agent:			

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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 X Remove X Add	PT         John D           V         Mike John S           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add	D	Arraven Musgrove	590 NW 47 Terrace Mami, FL
Remove			33127
2) Change Add			
Remove 3) Change	·		
Add			
4) Change Add Remove			
5) Change Add			
Remove			
6) Change Add Remove			

(attach additional shee	g additional Articles, enter ts, if necessary). (Be spec	change(s) nere:		
	-			
	. 1	<b>.</b>		
	D ! !	$\bigvee \lambda$		
		17'	·	
		•		
				,

The date of each amendment(s) adoption: IVI arch 25, 2015
Effective date if applicable: March 25, 2013  (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated March 25,2013
Signature
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Arraven Musgrove (Typed or printed name of person signing)
Director
(Title of person signing)