POIDDS903

(Re	equestor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
. PICK-UP	MAIT	MAIL.		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
	-			

Office Use Only



200275045292

07/15/15--01027--002 **35.00

JUL 1 6 2015

R. WHITE

COVER LETTER

TO; Amendment Section Division of Corporations

NAME OF CORPORATION: Lighthouse Holding, Onc.				
DOCUMENT NUMBER: PO/000902/3				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Matasha Friedenberg (Name of Contact Person)				
(Name of Contact Person)				
Clo DFASS				
(Firm/ Company)				
555 NE 185 St., Ste. #201 (Address)				
(Address)				
Mianui El 32179				
Mianu', FL 33179 (City/ State and Zip Code)				
Matasha. Friedenberg & dFass. Com E-mail address: (16) be used for future annual report notification)				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Matasha Friedenberg at 305-654-9200 x6 156 (Name of Contact Person) (Area Code) (Daytime Telephone Number)				
(Name of Contact Person) (Area Code) (Daytime Telephone Number)				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)				

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

网络西

Articles of Incorporation JUL 15 PM 3: 00 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the 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 ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

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

Mike Jones, V as Remove, and Sally Smith, SV as an Add. 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, 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

94 10 C 2 9 12 G	Kemon
	ppv ——
······································	6) — Change
э	Кетол
	ppV ——
	S) Change
э	Кетол
	bbA
	4) Change
э.	У Ветом
	ppV
1 10 A3	3) Change
ə.	Kemov
	bbA
Juliette Klepa	2) Change
э.	Remov
	pp¥
FTD Bernard Klepac	1) Change
Title Name	Type of Action (Check One)
PT John Doe V Mike Jones Sally Smith	Example: \overline{X} Change \overline{X} Add

E. If amending or adding additional Arti (attach additional sheets, if necessary).	cles, enter change(s) here:	
(attach additional sheets, if necessary).	(Be specific)	
	NIA	
	·	
- H-11.		
	.	

7.44		

l'he	date of each amendment(s) add this document was signed.	option: 6/1/2015	, if other than the
Effe	ective date <u>if applicable</u> :	•	
		(no more than 90 days after amendment file da	ite)
	e: If the date inserted in this blocument's effective date on the Dep	ck does not meet the applicable statutory filing require artment of State's records.	ements, this date will not be listed as the
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast fo	or the amendment(s)
	There are no members or memb adopted by the board of director	ers entitled to vote on the amendment(s). The amend rs.	lment(s) was/were
	Dated	12015	
	· 	12015 14MM	
	have not bee	han or vice chairman of the board, president or other n selected, by an incorporator – if in the hands of a re ppointed fiduciary by that fiduciary)	
	_ B	oernard Klepach (Typed or printed name of person signi	
	_		ing)
		(Title of person signing)	
		t i the of person significati	