

LP900000000020

(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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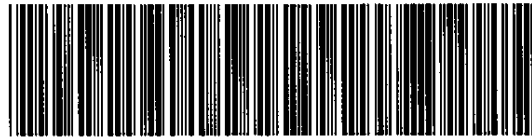
Special Instructions to Filing Officer:

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MAY 29 2009

EXAMINER

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05/18/09--01035--004 **25.00

FILED
09 MAY 28 AM 11:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ATI SURVEYING & MAPPING LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANNE LEMOS
Name of Person

ATI SURVEYING & MAPPING, LLC
Firm/Company

4610 CENTRAL AVENUE
Address

ST PETERSBURG, FL 33711
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANNE LEMOS at (727) 328-0268
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 19, 2009

ANNE LEMOS
4610 CENTRAL AVENUE
ST. PETERSBURG, FL 33711

SUBJECT: ATI SURVEYING & MAPPING LLC
Ref. Number: L09000000820

We have received your document for ATI SURVEYING & MAPPING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 809A00017042

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ATI SURVEYING & MAPPING LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on JAN. 05, 2009 and assigned Florida document number L09000000820.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

, Florida

City

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TALLAHASSEE FLORIDA

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent


If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PRESIDENT</u>	<u>BRUCE S MCGEHEE</u>	<u>4610 CENTRAL AVE</u> <u>ST PETERSBURG, FL 33711</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>PRESIDENT</u>	<u>DIMITRI GAUQUIER</u>	<u>4610 CENTRAL AVE</u> <u>ST PETERSBURG FL 33711</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VICE-PRESIDENT</u>	<u>BRUCE S MCGEHEE</u>	<u>4610 CENTRAL AVE</u> <u>ST PETERSBURG FL 33711</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VICE PRESIDENT</u>	<u>DENNIS BENHAM</u>	<u>4610 CENTRAL AVE</u> <u>ST PETERSBURG FL 33711</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____



Signature of a member or authorized representative of a member

DIMITRI GAUQUIER

Typed or printed name of signee

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 TALLAHASSEE FLORIDA