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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

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JUN 28 2010

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 21 AM 10:07

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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:

Nicole Russ

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:

Nicole Russ

Name of Person

at (727)

328-0268

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

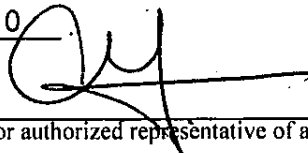
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Pres.	Dimitri Gauquier	4610 Central Avenue St. Petersburg, FL 33711	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Pres.	Carlos Lemos	4610 Central Avenue St. Petersburg, FL 33711	<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
			<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 June 11, 2010



Signature of a member or authorized representative of a member

Carlos Lemos

Typed or printed name of signee