

L18000178340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

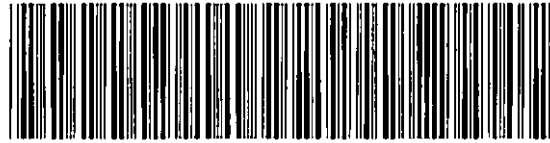
(Business Entity Name)

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DATE 10/16/23 BY SP-10

2023 OCT -6 P. 12:40

ED

R. HUNT  
10/16/23

**Sunshine State Corporate Compliance Company**

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 10/6/2023

**\*\*WALK IN\*\***

ENTITY NAME 3052 N ATLANTIC BLVD LLC

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXX  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Plain Copy*

*Certified Copy*

*Certificate of Status*

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**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

**\*\*APOSTILLE' / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$25.00

ACCOUNT #: I20160000072

*S R J*

Please call Tina at the above number for any issues or concerns. *Thank you so much!*



**If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:**

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ROBERT C AUMENT	300 S. WACKER DRIVE, SUITE 2200	<input checked="" type="checkbox"/> Add
		CHICAGO, IL 60606	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DAVID F. MACNEIL	84 ISLA BAHIA DRIVE	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33316	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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2018  
 JUN 16 PM 3:40  
 Add  
 Remove  
 Change  
 Add

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

Multiple horizontal lines for amending information.

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10/1/2023

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated OCTOBER 6 2023

Signature of a member or authorized representative of a member

ROBERT C. AUMENT

Typed or printed name of signee

Filing Fee: \$25.00