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COVER LETTER

TO: Registration Sect Division of Corpo			
subject: <u>Atlan</u>	tis Business Name of Lim	Solutions, LLC ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Prince	MoraleS Name of Person	
	Atlanti	s Business Solutions, 1	LLC.
	2213 Ke	ndall Springs Court,	APT #304
	Brandon	N FL 33510 City/State and Zip Code	
		to be used for future annual report notification)	
For further information cor	ncerning this matter, please co	all:	2014 AUG 25
Prince Name of I	Morales	at (813) 377-9351 Area Code Daytime Telephone	
Enclosed is a check for the	following amount:		55
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	50.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
Registrat	IG ADDRESS: ion Section of Corporations .6327	STREET/COURIER ADDR Registration Section Division of Corporations Clifton Building	ESS:

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Atlantis Business Solutions, LLC (Name of the Limited Liability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on 07/01/2014 Florida document number <u>L14000104631</u> 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

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 605, 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

, Florida

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = AMBR =	Manager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Richard Morales Fernandez	Richard Morales Fernande	Z_ ⊠ Add
		7558 Forest Mere Dr.,	□ Remove
		Riverview, FL 33578	
			□ Add
			□ Remove
			
			□ Add
			Remove
			_
			_□ Add
			Remove
			- 28
			Add Maria
			Remove P
		- <u></u>	Add Semove
			_□ Add
			_□ Remove

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fective date, if other the effective date must be spec	an the date of filing:	or filed date and can	(optional)
	an the date of filing:	t or filed date and can	(optional) not be more than 90 days after
e date this document is filed	by the Florida Department of State)	t or filed date and can	(optional) anot be more than 90 days after
e date this document is filed	by the Florida Department of State)	·	(optional) nnot be more than 90 days after
e date this document is filed	by the Florida Department of State)	·	(optional) nnot be more than 90 days after

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