I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: LINDSEY RITTER

Electronic Signature of Signing Officer/Director Detail

2919 PAR LN UNIT B TALLAHASSEE, FL 32301 US

Entity Name: ATLANTIS IE, A CONDOMINIUM, INC.

Current Principal Place of Business:

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FEI Number: 58-2261297

Current Mailing Address:

DOCUMENT# 756467

2919 PAR LN UNIT B TALLAHASSEE, FL 32301

Name and Address of Current Registered Agent:

RITTER, LINDSEY 2919 PAR LN UNIT B TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	Р	Title	S
Name	RITTER, LINDSEY	Name	MILLER, BRIAN
Address	2919 PAR LN UNIT B	Address	P.O. BOX 14078
City-State-Zip:	TALLAHASSEE FL 32301	City-State-Zip:	TALLAHASSEE FL 32317

Date

Certificate of Status Desired: No

01/29/2020

Date