

2024 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L18000262566

Entity Name: ATS HOLY ROYAL ARCH MASONS LLC

Current Principal Place of Business:

85 N.W. 5TH AVENUE
DELRAY BEACH, FL 33411

Current Mailing Address:

85 N.W. 5TH AVENUE
DELRAY BEACH, FL 33411 US

FEI Number: 83-3384678

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CANTON, JIMMY
85 N.W. 5TH AVENUE
DELRAY BEACH, FL 33411 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: JIMMY CANTON

03/19/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	AUTHORIZED MEMBER, MANAGER
Name	ALEXANDER, TERRY	Name	CANTON, JIMMY
Address	1919 BEAUTIFUL AVE	Address	85 N.W. 5TH AVENUE
City-State-Zip:	WEST PALM BAECH FL 33407	City-State-Zip:	DELRAY BEACH FL 33411
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER, MANAGER
Name	GLOVER, PATRICK	Name	MADDEN, KEN
Address	85 N.W. 5TH AVENUE	Address	85 N.W. 5TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33411	City-State-Zip:	DELRAY BEACH FL 33411
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER, MANAGER
Name	LOCKHART, GEORGE	Name	WIMS, WILLIAM
Address	85 N.W. 5TH AVENUE	Address	85 N.W. 5TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33411	City-State-Zip:	DELRAY BEACH FL 33411

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JIMMY CANTON

MANAGER

03/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date