

LD4000033662

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

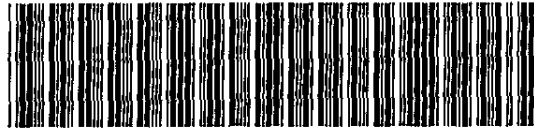
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400071545584

04/24/06--01037--003 **25.00

FILED
SECRETARY OF STATE
2006 APR 24 PM 12:23

[Handwritten signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ADVANCED TECHNOLOGIES FOR MEDICINE, 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:

William J. Cotter

(Name of Person)

Cotter & Associates, LLC

(Firm/Company)

8182 South Cass Avenue

(Address)

Darien, IL 60561

(City/State and Zip Code)

FILED
SECRETARY OF STATE
2006 APR 24 PM 12:23

For further information concerning this matter, please call:

William J. Cotter

(Name of Person)

at (630) 724-9950

(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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ADVANCED TECHNOLOGIES FOR MEDICINE, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on May 4, 2004 and assigned
document number L04000033662

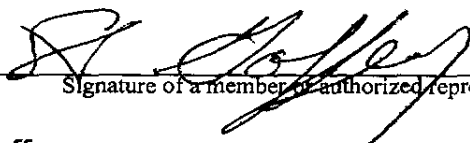
SECOND: This amendment is submitted to amend the following:

The name of the company is changed to:

ATM Liquidation, LLC

Dated April, 2006

FILED
SECRETARY OF STATE
2006 APR 24 PM 12:23



Signature of a member or authorized representative of a member

Stan Gaffey

Typed or printed name of signee

Filing Fee: \$25.00