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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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# # FEB 05 2008

# **COVER LETTER**

TO: Registration Section Division of Corpora				
SUBJECT: B/	ATL, LLC			
	(Name of Limited Liability Company)			
The enclosed Articles of Ame	endment and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
-	Millard Longman (Name of Person)			
<del>-</del>	BATL, LLC (Firm/Company)			
_	12648 NW 18 Place			
	12648 NW 18 Place  (Address)  Coral Springs FL 33071  (City/State and Zip Code)			
For further information conce	erning this matter, please call:			
Millard L (Name of Pe	-ongman at (954) 752-095/ (Area Code & Daytime Telephone Number)			
Enclosed is a check for the fo	ellowing amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  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

BATL	LLC	
(Name of the Limited I	iability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Lia Florida document number 4070003	bility Company were filed on 3/22/20	and assigned
This amendment is submitted to amend the follow		FEB -4
A. If amending name, enter the new name of	the limited liability company here:	PM 3: 41
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the designation	"LLC" or the abbreviátion
B. If amending the registered agent and/or registered agent and/or the new registered off	r registered office address on our records, <u>ente</u> ice address here:	r the name of the new
Name of New Registered Agent:  New Registered Office Address:	20423 State Road 7 FG	<u></u>
(Enter Florida street address)		
	Boca Raton, Florida	33498 (Zip Code)

## 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 608, 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)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title** <u>Name</u> Address Type of Action ☐ Add Remove ☐ Add ☐ Remove Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) EIN' 208698657

> Chature of a member or authorized representative of a member Millard Longman
> Typed or printed name of signee

Dated\_

Page 2 of 2

Filing Fee: \$25.00