# L10000056975

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C. LEWIS JAN 2 3 2013 **EXAMINER** 

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

₩ \*\*\*

## ATR Financial Group, 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:

#### **Thomas Tillman**

Name of Person

## Tillman & Associates, Inc.

Firm/Company

### 6625 Dolphin Cove Drive

Address

## Apollo Beach, Florida 33572

City/State and Zip Code

#### tomtill@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

#### **Thomas Tillman**

Name of Person

813 230-2111

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

January Street Commencer

□\$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



2013 JAN 22 PM 2: 02

ATR Fina ( <u>Name of the Limited Liability Co</u> (A Florida Limi	ancial Group, LLC mpany as it now appeal ited Liability Company)	rs on our records.)	<del></del>	
The Articles of Organization for this Limited Liability Com Florida document number L10000056975	pany were filed on	May 26, 2010	_ and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	l liability company her	<u>re</u> :		
Thomas Morg	gan Tillman, Sr, LL	C		
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Compa	any," the designation "LL	C" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRES	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, <u>enter the</u>	name of the new	
Name of New Registered Agent:			<del></del>	
New Registered Office Address:				
	Enter Florida street address			
		, Florida		
	City		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 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: SECRETARY OF LAMB DIVISION OF CORP PARTIES MGR = Manager MGRM = Managing Member 2013 JAN 22 PM 2: 02 **Title** <u>Name</u> <u>Address</u> **Type of Action** 12714 Pompanic Street McLeod, Thomas L JR **MGRM** San Antonio FL 33576 Remove Remove Remove Remove

<b>D.</b> 1	f amending any other information, enter change(s) here: (Attach additional sheets, if necessary), FO	itional sheets, if necessary), ED SECRETARY OF STATE ONISION OF BORK ARE HOW		
	nwision of corps	不行 <sup>时</sup> 的。		
		2: 02		
Date	dJanuary 16,2013			
	Signature of a member or authorized representative of a member	<del></del>		
	Thomas M Tillman	_		
	Typed or printed name of signee			

Page 3 of 3

Filing Fee: \$25.00