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# **COVER LETTER**

TO: Registration S Division of Co				
ATAR GR SUBJECT:	OUP, L.L.C.			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	JUAN CARLOS VAAMO	NDE		
		Name of Person	<del></del>	
	ATAR GROUP, L.L.C.			
		Firm/Company		
	175 SW 7TH STREET, SU	JITE 1502		
		Address		
	MIAMI, FLORIDA 33130	)		
		City/State and Zip Code		
	sales@atar-group.com		× ×	
,	E-mail address: (	to be used for future annual report notifica		77
For further information	concerning this matter, please co	all:	AHA:	F
JUAN VAAMONDE		305 450-9250 at ()	30 F	IL ED
Name Enclosed is a check for	of Person the following amount:	Area Code Daytime To	elephone Number 3	D
\$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

ATAR GROUP, L.L.C.				
(Name of the Lim	ited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Included In	Liability Company	were filed on	and assigned	
his amendment is submitted to amend the fol	lowing:			
a. If amending name, enter the new name of	of the limited liab	ility company here:		
he new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		175 SW 7TH STREET		
		SUITE 1502		
		MIAMI, FLORIDA 33130		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		175 SW 7FH STREET		
		SUITE 1502		
		MIAMI, FLORIDA 33130		
3. If amending the registered agent and egistered agent and/or the new registered of Name of New Registered Agent:		<u>e</u> :	MISSEE THE TRAVET OF THE SEE THAN 30 F	
		TREET, SUITE 1502	STAN	
	MIAMI	Enter Florida street address	33130	
	···	, Flori City	aa 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 605, 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 Authorized Person(s) authorized to manage,  $\underline{enter}$  the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	JUAN CARLOS VAAMONDE	5033 NW 94 DORAL PL	_ □ Add
		DORAL, FLORIDA 33178	■ Remove
			Change
MGRM	ANDREA R. TADDEI D.	175 SW 7TH STREET, ST 1502	■ Add
		MIAMI, FLORIDA 33130	□ Remove
		<del></del>	☐ Change
			Add
		***************************************	□ Remove
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(If an effect Note: If	e date, if other than the date of filing the date is listed, the date must be specific at the date inserted in this block does not t's effective date on the Department of	ind cannot be prior to t meet the applicab			
the reco	rd specifies a delayed effective Oth day after the record is filed		an effective time, at	12:01 a.m. on the	e earlier of:
			1111111/		
) The 9	OVEMBER 18	,	- /////		
) The 9		_,	zed representative of a memi	200	

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Filing Fee: \$25.00