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SEGRETARY OF TATE A

JUL 05 2016 S. YOUNG

COVER LETTER

TO: Registrat Division o	ion Section of Corporations		
SUBJECT:	MIDLAND ATLAN	TIC 11C	
Sobseci.		ted Liability Company	
The enclosed Artic	les of Amendment and fee(s) are subr	nitted for filing.	
Please return all co	rrespondence concerning this matter t	to the following:	
	- FRANCI.	SCO CHACON Name of Person	
	<u> </u>	Firm/Company	
	6940	PLANTATION RD. Address	<u></u>
	PL	ANTATION, FL 33.	16 JUL -1 PH 1: 03
		TLMANAGE @ GMAIL of o be used for future annual report notif	ication)
For further informa	ation concerning this matter, please ca		reation) H T CORRECTION
FRAN	JUSCO CHACÓN	at (954) 600 C	279
Ŋ	Name of Person	Area Code Daytime	: Telephone Number
Enclosed is a check	c for the following amount:		
□ \$25.00 Filing F	Fee □ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
F Leader Street Company (1997) P	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Cliffon Building	n ations inter Circle

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

(Name of the Limited Liability C (A Florida Lir	Company as it now appearanted Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Com	pany were filed on _	NOV. 2, 201	and assigned
Florida document number <u>L11000125366</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	l liability company l	<u>ere</u> :	
The new name must be distinguishable and contain the words "Limited	Liability Company." the	designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u></u>	•	SEE SEE
			- 5
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			- 3
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		n our records, <u>ente</u>	r the name of the nev
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	orida street address	
		, Florida _	
 	City		Zip Code
New Registered Agent's Signature, if changing Registered A	gent:		

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, enter the title, name, and address of each person being added or removed from our records:

MGR.= Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	FERNANDO SALAZAR	6940 PLANTATION RD.	\ Add
		PLANTATION, FL 33317	Remove
		<u></u> :	☐ Change
AMBR	CARLOS SALAZAR	6940 PLANTATION RD.	IS Add
		PLANTATION, FL 33317	□ Remove
			☐ Change
			🗆 Add
			SECRETA TALLAHA
			Change SS R
			CRETARY OF CARETARY OF CARETARY OF CHARLES FLOATER
			Remove
			🗅 Change
			D Add
			□ Remove
			Change
			🗆 Add
			🗆 Remove
			☐ Change

OWNERSHIP IN MIDLAND ATLANTIC LLC AS A PERCENTAGE:	
PATRICIO SALAZAR - 52.93	<u></u>
FERNANDO SALAZAR - 24.04	
CARLOS SALAZAR - 23.03	
	
	
	16
	<u></u>
tive date, if other than the date of filing:	ursuant to 605.0 I not be listed
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on a 90th day after the record is filed.	the earlier
JUNE 28 . 2016	
1. 0	

Page 3 of 3

Filing Fee: \$25.00