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COVER LETTER

TO:

Registration Section

Division of Cosporations,

SUBJECT:

ATLANTIS CONSTRUCTION CO 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:

GEORGE BYRNE

Name of Person

ATLANTIS CONSTRUCTION CO.LLC

Firm/Company

2377 EAGLE TRACE DRIVE

Address

KISSIMMEE, FL 34746

City/State and Zip Code

GBYRNE5182@AOL.COM

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

For further information concerning this matter, please call:

GEORGE BYRNE

,,,407,908-3128

Name of Person

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

ATLANTIS CONSTRUCTION LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 2/9/12 and assigned Florida document number <u>L12</u>000019231 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: **GEORGE BYRNE** Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 6087 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 = Man MGRM = M	ager anaging Member		
<u>Title</u>	Name	Address	Type of Action
MGR	HELEN A BYRNE	2377 EAGLE TRACE DRIVE	Add
		KISSIMMEE, FL 34746	Remove
MGR	GEORGE BYRNE	2377 EAGLE TRACE DRIVE	
		KISSIMMEE, FL 34746	Remove
			Add
			Remove
			Add Remove
			_ Add _ Remove
			_ Add _ Remove
			_

. I	f amending	any other	information, ent	er change(s) here:	(Attach additional sheets, if necessi	ary.)
			<u>'</u>			
						
	-	- . <u></u>				
ıte	JULY	14	2 1	2015		
			Jungo	Pm		
	7		Signature of	a member or authori	zed representative of a member.	
		CURGI	BYRNE	Typed or printed	name of signee	

Page 3 of 3

Filing Fee: \$25.00

15 JUL 27 AM 8:52
SECRETARY OF SIMIE
TALKAHASSEE, FLORIDA