

10/11/2017

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L1400084275

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To:

Division of Corporations
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ATLAS OPTIMA CONSULTING LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Atlas Optima Consulting 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:

Kriston Kenific

Name of Person

The Kenific Group, Inc.

Firm/Company

3975 Fair Ridge Drive, Suite N250

Address

Fairfax, Virginia 22033

City/State and Zip Code

kris.kenific@kenificgroup.com

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

For further information concerning this matter, please call:

John C. Weldin, Attorney-at-Law

703 347-2032
at ()

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**

Atlas Optima Consulting 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 May 27, 2014 and assigned
Florida document number L14000084275

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 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 ADDRESS**)

3975 Fair Ridge Drive, Suite N250

Fairfax, Virginia 22033

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

3975 Fair Ridge Drive, Suite N250

Fairfax, Virginia 22033

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:

Name of New Registered Agent:

CT Corporation System

New Registered Office Address:

1200 South Pine Island Road

Enter Florida street address

Plantation

Florida 33324

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 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

MGR = Manager
AMBR = Authorized Member

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Division of

17 OCT 11 AM 9:53

FILED

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated October 11 2017

Digitally signed by Kriston M

Kenific:A01098000000151589115F10

Kenific: A0109800000151589115F100002CC9

0002CC9

2017-08-01 14:17:58-04'00

Kriston Kenific, CEO, The Kenific Group, Inc. (Sole Member)

Typed or printed name of signee