L14000140356

_

Office Use Only



300271082393

04/03/15--01024--003 **30.00

DIVISION OF CURRED ATTEN

C.V. D.B

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Atlantis Coral Realty and Management 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:
Charles David Taylor Name of Person
Charles David Taylor Name of Person Attentis Coral Realty and Management LLC Firm/Company
12716 Blue Lagoon Tr. N. Address
Jacksonville, FL 32225
Jacksonville, FL 32225 City/State and Zip Code Devidtaylor 8183 @ 9mx.1. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Charles D. Taylor Name of Person at (513) 376-4060 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee \$ 30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

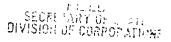
MAILING ADDRESS:

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 Coral Name of the Limited	Recity and Management 15,APR - 3 PH 2: 27 Liability Company as it now appears on our records.)
The Articles of Organization for this Limited Liab Florida document number <u>L140001403</u>	· · · · · · · · · · · · · · · · · · ·
This amendment is submitted to amend the follow	ing:
A. If amending name, enter the new name of the Atlantis Coral Man. The new name must be distinguishable and end with the work.	ne limited liability company here: **Regement LLC** rds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, enter the name of the new se address here:
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Enter Florida street address
	, Florida
	A ====

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

<u>Title</u>	<u>Name</u>	Address	Type of Action
		····	
			□ Remove
			□ Add
			□ Remove
			□ Remove
			□ Remove
			□ Remove
			Remove

we are now operating a restourant. SECRETARY UP S DIVISION OF CORPOR	
4r for a DM (ATIŽE
	2: 27
40 1 2 20.5	
E. Effective date, if other than the date of filing: APCI 3, 2015 (optional) (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)	
Dated Morch 30 , 2015.	
252	
Signature of a member or authorized representative of a member	
Charles D. Taylor Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00