

6/4/2019

Division of Corporations

L15000100222

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6363

From:

Account Name : BALWANT CHEEMA PA
Account Number : I20140000096
Phone : (305)698-1321
Fax Number : (305)675-8496

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: mercy@balcpa.com

APPROVED
AND
FILED
2019 JUN -5 AM 8:44
CLERK OF COURT
JANICE L. STANLEY

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ATRISY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2019 JUN -5 AM 8:44

Electronic Filing Menu

Corporate Filing Menu

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JUN 06 2019

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COVER LETTER**TO: Registration Section
Division of Corporations****SUBJECT: ATRISY, 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:

MERCY PEREZ

Name of Person

BALWANT CHEEMA CPA

Firm/Company

4160 WEST 16TH AVE SUITE 405

Address

HIALEAH, FL 33012

City/State and Zip Code

mercy@balcpa.com

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

For further information concerning this matter, please call:

MERCY PEREZ

305

829-2252

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ATRISY, 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 06/09/2015 and assigned
Florida document number L15000100222

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.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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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

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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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	DIEGO M. BENBASSAT	4160 WEST 16TH AVENUE	<input checked="" type="checkbox"/> Add
		SUITE 405	<input type="checkbox"/> Remove
		HAIALEAH, FL 33012	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Date: _____

June 4, 2019

Signature of a member or authorized representative of a member

DIEGO M. BENBASSAT

Typed or printed name of signer

Filing Fee: \$25.00

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