

L17 000 104 118

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

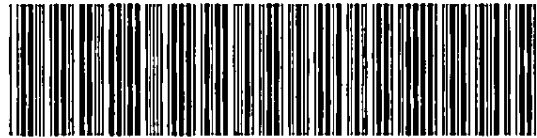
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/27/21--01020--008 **25.00

FILED
2021 DEC 27 PM 2:18
TALLAHASSEE, FL

PRICE
\$25.00

ATTN: Anissa Butler

Amendment Section

DATE: 12-15-21

Dear Anissa,

In regards to our telephone call on 12-14-21, please find the attached information as requested to remove Matthew Antonio from Atlantic Builders & Construction LLC. Effective 12-15-21 As he is no longer with the Company.

A check for \$25.00 Filing Fee is also enclosed.

We appreciate you attention in this matter and look forward to hearing back from you.

Sincerely,



Kathleen Antonio for Matthew Antonio

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2021 DEC 27 PM 2:18
SEAL
TALLAHASSEE FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Atlantic Builders & Construction Services 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:

Matthew Antonio

Name of Person

Ancient City Construction, Inc.

Firm/Company

2614 JOE Ashton Rd.

Address

St. Augustine FL 32092

City/State and Zip Code

Matthew@ancientcityconstruction.com

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

For further information concerning this matter, please call:

Matthew Antonio

Name of Person

Matthew

at

904

Area Code

347-7993

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2021 DEC 27 PM 2:18
TALLAHASSEE, FL
SECRET

011 PM

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

(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 _____ and assigned
Florida document number _____.

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) _____

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

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>
<u>VP</u>	<u>Matthew J. Antonio</u>	<u>124 Southwind Circle</u> <u>St. Augustine, FL 32080</u>	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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TALLAHASSEE, FL
FBI

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

2021 DEC 27 PM 2:18
SECURITY
TALLAHASSEE, FL


F. Effective date, if other than the date of filing: 12-15-21 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

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 December 15, 2021


Signature of a member or authorized representative of a member

Matthew Antonio
Typed or printed name of signee

Filing Fee: \$25.00