



Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

2017 NOV -8 PM 2:30

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ATLANTIS MOB, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

D. SCOTT  
NOV 9 2017

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Atlantis MOB, 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:

A. Michael Lee, Esq.

\_\_\_\_\_  
Name of Person

Jones Day

\_\_\_\_\_  
Firm/Company

1420 Peachtree Street, N.E.; Suite 800

\_\_\_\_\_  
Address

Atlanta, Georgia 30309

\_\_\_\_\_  
City/State and Zip Code

alice@jonesday.com

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

For further information concerning this matter, please call:

A. Michael Lee, Esq.

404 581-8428

\_\_\_\_\_  
Name of Person

at ( )  
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 &  
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(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 MOB, 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 June 21, 2017 and assigned  
Florida document number L17000133830

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:

Sanders Law Group, P.A.

New Registered Office Address:

2958 1st Avenue N.

(Enter Florida street address)

St. Petersburg

Florida 33713

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>
MGR	R. Patrick Marston	435 5th Avenue N, Suite 200	<input type="checkbox"/> Add
		St. Petersburg, Florida 33701	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Coffee Ventures SP, LLC	c/o Optimal Outcomes, LLC	<input type="checkbox"/> Add
		435 5th Avenue N, Suite 200	<input type="checkbox"/> Remove
		St. Petersburg, Florida 33701	<input type="checkbox"/> Change
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(b) The 90th day after the record is filed.

Signature of a member of authorized

Signature (i) a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**