

L17000188428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



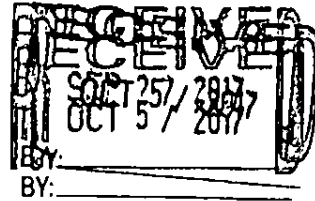
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 18, 2017

NICHOLE PUENTES
6910 NW 12TH ST
MIAMI, FL 33126

SUBJECT: NEWSLINK OF ATL HOLDINGS, LLC
Ref. Number: L17000188428

We have received your document for NEWSLINK OF ATL HOLDINGS, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

The document number of the name conflict is L17000192037.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist II

Letter Number: 617A00018943

017 OCT 27 AM 11:37

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NewsLink of ATL Holdings, 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:

Nichole Puentes

Name of Person

NewsLink

Firm/Company

6910 NW 12th Street

Address

Miami, FL 33126

City/State and Zip Code

nturiano@newslinkgroup.net

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

For further information concerning this matter, please call:

Nichole Puentes

305

594-5754

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



6910 N.W. 12th Street
Miami, Florida 33126
(305) 594-5754; Facsimile: (305) 477-5261
www.newslinkgroup.net

October 17, 2017

VIA USPS CERTIFIED MAIL

Octavia L. Simmons
Regulatory Specialist II
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Re: NewsLink of ATL Holdings, LLC/ Reference Number: L17000188428
Conflict Number: L17000192037
Letter Number: 617A0008943**

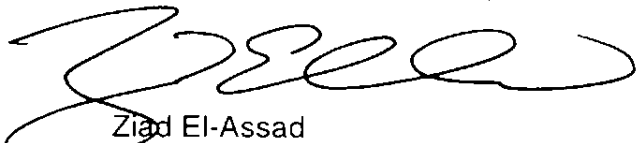
Ms. Simmons:

Please accept this letter from NewsLink of Atlanta, LLC authorizing NewsLink of ATL Holdings, LLC to change its name to NewsLink of ATL, LLC. Both entities are part of the NewsLink group of companies.

If you have any questions or require any additional information, please contact me at (305) 594-5754 or email me at zelassad@newslinkgroup.net.

Sincerely,

NEWSLINK OF ATLANTA, LLC



Ziad El-Assad
Vice President of Development

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

NewsLink of ATL Holdings, 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 09/05/2017 and assigned
Florida document number L17000188428.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NewsLink of ATL, LLC

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: _____ (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 September 16, 2017


Signature of a member or authorized

Signature of a member or authorized representative of a member

Ziad El-Assad

Typed or printed name of signee