

L17000241558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

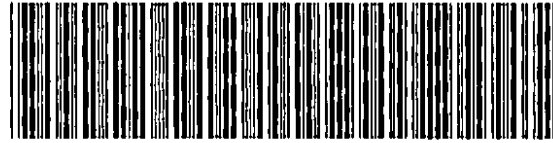
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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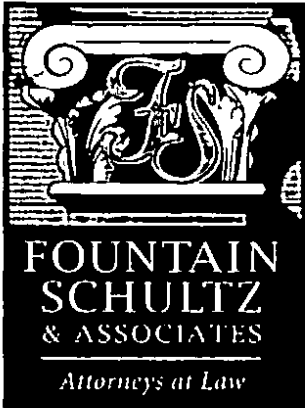
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December 8, 2017



KENNETH R. FOUNTAIN  
KERRY ANNE SCHULTZ  
SCOTT C. BRIDGFORD

**VIA REGULAR U.S. MAIL**

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

**Re:** ATB Property Investments, L.L.C.

Dear Sir or Madam:

Enclosed please find the original and one copy of the Articles of Amendment to Articles of Organization for the above-referenced entity. Also enclosed is a check in the amount of \$25.00 for filing fee.

Please return a filed copy to me in the enclosed pre-addressed stamped envelope.

Should you have any questions, please advise. Thank you for your assistance in this matter.

Sincerely,  
**Fountain, Schultz & Associates, P.L.**

Kerry Anne Schultz, Esquire

KAS:amf  
cc: Client

Enclosures

2045 FOUNTAIN PROFESSIONAL CL.  
SUITE A  
NAPLES, FLORIDA 32566  
TEL: (850) 939-3535  
FAX: (850) 939-3539

SANTA ROSA BEACH  
TEL: (850) 622-2700  
FAX: (850) 622-2722

[WWW.FOUNTAINLAW.COM](http://WWW.FOUNTAINLAW.COM)

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** ATB Property Investments 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:

Kerry Anne Schultz  
Name of Person  
Fountain, Schultz & Associates, PL  
Firm/Company  
2045 Fountain Professional Ct., Suite A  
Address  
Navarre, FL 32566  
City/State and Zip Code  
kaschultz@fountainlaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kerry Anne Schultz at ( 850 ) 939-3535  
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

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

ATB Property Investments 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 11/22/17 and assigned Florida document number L17000241558.

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: Kerry Anne Schultz

New Registered Office Address: 2045 Fountain Professional Court, Suite A

*Enter Florida street address*

Navarre, Florida 32566  
*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	Melissa A. Goolsby, Co-Trustee	3036 Via Conquistadores	<input checked="" type="checkbox"/> Add
	of the Goolsby Revocable Trust, dated June 10, 2015	Navarre, FL 32566	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	John Kevin Goolsby, Co-Trustee	3036 Via Conquistadores	<input type="checkbox"/> Add
	of the Goolsby Revocable Trust, dated June 10, 2015	Navarre, FL 32566	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

BY DEC 11 AM 8:49

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

Multiple horizontal lines for amending information.

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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 12 - 8 - 2017

Melissa Goolsby

Signature of a member or authorized representative of a member

Melissa Goolsby

Typed or printed name of signee