

L180000 48459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

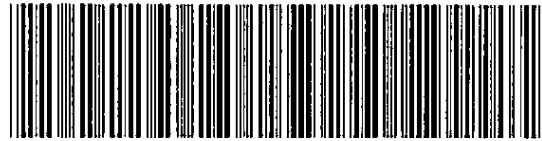
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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06/25/19--01015--006 \*\*25.00

2019 JUL 23 PM 3:30

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Amend

JUL 10 2019  
I ALBRITTON

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** ATG COLUMBIA 3, 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:

SHANNY BREGMAN

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

GOLDTREE TAX SERVICES LLC

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

56 GLENWOOD DRIVE NORTH

\_\_\_\_\_  
Address

BERGENFIELD, NJ 07621

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

arnon.gitelman@gmail.com

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

For further information concerning this matter, please call

SHANNY BREGMAN

516 2526007

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

2019-01-23 PM 3:30

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

Page 1 of 3

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	ATG INVESTMENTS LLC	34/5 HAODEM ST.	<input checked="" type="checkbox"/> Add
		HOD HASHARON, ISRAEL, 4535966	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MNG	GITELMAN ARNON	34/5 HAODEM ST.	<input type="checkbox"/> Add
		HOD HASHARON, ISRAEL, 4535966	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MNG	GITELMAN TAMAR	34/5 HAODEM ST.	<input type="checkbox"/> Add
		HOD HASHARON, ISRAEL, 4535966	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	KUSHNER JONATHAN	1625 N COMMERCE PKWY SUITE 315	<input type="checkbox"/> Add
		WESTON, FL 33326	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MATTITYAHU BEN	1625 N COMMERCE PKWY SUITE 315	<input type="checkbox"/> Add
		WESTON, FL 33326	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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)

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.

Signature of a member or authorized representative of a member

\_\_\_\_\_  
Type or printed name of signee