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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

rporations		
	Name of Limited Liability Company It and fee(s) are submitted for filing. Cerning this matter to the following: ERLIKH Name of Person NA TAX SERVICES INC Firm/Company DCEAN DR STE 216 Address TWOOD, FL 33019 City/State and Zip Code E-mail address: (to be used for future annual report notification) nis matter, please call:	
Amendment and fee(s) are sub	mitted for filing.	
ondence concerning this matter	to the following:	
INNA ERLIKH		
	Name of Person	
CORONA TAX SERVICE	ES INC	
	Firm/Company	· · · · · · ·
3800S OCEAN DR STE 2	16	
	Address	
HOLLYWOOD, FL 33019)	
	City/State and Zip Code	
E-mail address: (to be used for future annual report notif	ication)
concerning this matter, please ca	alt:	
	at ()	
i Person	Area Code Daytime	: Telephone Number
he following amount:		
☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
	E-mail address: (concerning this matter)	Amendment and fee(s) are submitted for filing. Amendment and fee(s) are submitted for filing. INNA ERLIKH Name of Person CORONA TAX SERVICES INC Firm/Company 3800S OCEAN DR STE 216 Address HOLLYWOOD, FL 33019 City/State and Zip Code E-mail address: (to be used for future annual report notification for filing this matter, please call: at () Area Code Daytime the following amount: □ \$30.00 Filing Fee & Certified Copy

MAILING ADDRESS:

TO:

Registration Section

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

ATLANT GROUP LLC			
(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on ou d Liability Company)	r_records.)	
The Articles of Organization for this Limited Liability Compar Florida document number $\frac{1.18000217697}{1.18000217697}$.	ny were filed on	8	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name most be distinguishable and contain the words "Limited Lia	bility Company," the designati	on "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:	· · · · · ·		 -
(Principal office address MUST BE A STREET ADDRESS)			
		7	<u> </u>
			007
Enter new mailing address, if applicable:		<u></u>	7
(Mailing address MAY BE A POST OFFICE BOX)			<u>च्या शि</u>
			2
		10 A	_
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		records, <u>enter the</u>	name of the nev
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida stree	et address	
·		Florida	
	City	;	Lip 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>	Address	Type of Action
AMBR	PYSMAK, KOSTIANTYN	3800 S OCEAN DR STE 216	⊜ Add
		HOLLYWOOD, FL 33019	☐ Remove
			Change
AMBR	CHEKALSKY, SERGIY	3800 S OCEAN DR STE 216	■ Add
		HOLLYWOOD, FL 33019	_ □ Remove
			☐ Change
			Remove
		·····	⊖ Add
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ffective date, if other t an effective date is listed, th	han the date of fili	ng:	n date of tiling or mo	opt re than 90 days afte	ional) r tiling) Pu	rsuant to 605.0	0207
ote: If the date inserted ocument's effective date	in this block does not	t meet the applical	ple statutory filing	requirements, th	is date will	l not be listed	d as
yearrent's effective date	on the Department of	Since s records.					
e record specifies a	delayed effective	date, but not	an effective til	me, at 12:01	a.m. on	the earlie	r o
The 90th day after	the record is filed	1.					
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