

K21 000 495 644

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

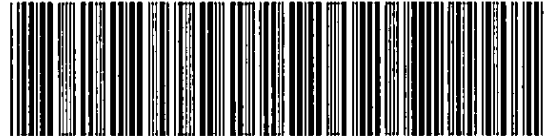
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/27/22--01018--010 **30.00

22 JAN 27 PM 3:05

T. MATTHEWS

FEB -3 2022

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: ATL CIGAR COMPANY FLORIDA 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:

PETER GROSS

Name of Person

ATL CIGAR COMPANY LLC

Firm/Company

544 E PONCE DE LEON AVE

Address

DECATUR, GA 30030 US

City/State and Zip Code

petergross@atlcigar.co

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

For further information concerning this matter, please call:

PETER GROSS

at (678) 462-3648

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

22 JAN 27 PM 3:06

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

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

(Mailing address MAY BE A POST OFFICE BOX)

_____, Florida _____
City Zip Code

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	ATL CIGAR COMPANY LLC	544 E PONCE DE LEON AVE	<input checked="" type="checkbox"/> Add
		DECATUR, GA 30030 US	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	PETER GROSS	544 E PONCE DE LEON AVE	<input type="checkbox"/> Add
		DECATUR, GA 30030 US	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AP	KELLY DEBOR	10860 76TH CT N, UNIT A	<input type="checkbox"/> Add
		SEMINOLE, FL 33777	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)
Indicate the date of filing or, if more than 90 days after filing

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) of the Minnesota Rules, if the filing is subject to the applicable statute's filing requirements, this date will not be listed as the effective date.

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 JANUARY 24, 2022

Signature of a member or authorized representative of a member

PETER GROSS

Typed or printed name of signee

Filing Fee: \$25.00