LZ1000515700

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COVER LETTER

	gistration Sec ision of Corp		*	~	er.	. •
SUBJECT:		ATIGOS MANAGEMENT, L	LC	•	.:	
SUBJECT.		Name of Limi	ted Liability Company		<u>-</u>	
The enclosed	d Articles of A	Amendment and fee(s) are sub-	nitted for filing.			
Please return	all correspor	ndence concerning this matter	to the following:			
		Jessica Shraybman, Esq.				
			Name of Person	<u> </u>		
		Shraybman Law, PLLC				
			Firm/Company		-	
		475 Brickell Ave., #4113				
			Address			22
		Miami, FL 33131				3S 2
			City/State and Zip Code			SEP 16
		team@shraybmanlaw.com	o be used for future annual re	eport notification		
For further in	nformation co	oncerning this matter, please ca		.,	•	22 SEP 16 AM 10: 17
Jessica Shra				.1835		17
	Name of	Person	at () Area Code	Daytime Teleph	none Number	
Enclosed is a	a check for the	e following amount:				
≣ \$ 25,00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)		S60.00 Filing Fee, Certificate of Stat Certified Copy (additional copy is enc	
Re Div		ection orporations	Division	tion Section of Corporation		
	D. Box 632' Ilahassee, F	l l	2415 N.	tre of Tallaha Monroe Stree see, FL 3230	et, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limiter		iny as it now appears on our re Liability Company)	ecords.)		
The Articles of Organization for this Limited Lia Florida document number L21000515700				_ and assigne	:d
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
п/а					
The new name must be distinguishable and contain the wo	rds "Limited Liabil	lity Company," the designation	"L.I.C" or the abbrev	riation "L.L.C."	19
Enter new principal offices address, if applica	ble:	66 West Flagler Street			<u> </u>
(Principal office address MUST BE A STREET	ADDRESS)	Suite 900		2 \$	- 15. - 15. - 15.
- ··		Miami, FL 33130		Бb	- 2,:
				91	- 7 .5
Enter new mailing address, if applicable:		same as principal address		<u>></u>	05.55 15.55
(Mailing address MAY BE A POST OFFICE B	ox)	•		9	35
4	<u> </u>			17	<u> </u>
B. If amending the registered agent and/or reagent and/or the new registered office address			nter the name of	f the new re	<u>gister</u>
Name of New Registered Agent:					
New Registered Office Address:	475 Brickell A				
		Enter Florida street a			
	Miami		, Florida <u>33131</u>		
		City	2	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

LOCOSTDATICOS MANACIMINE LLO

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.

Shanging 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>	Name	Address	Type of Action
	п/а		□Add
			□Remove
			☐ Change
			□Remove
		<u>. </u>	□ Add
			22 PER DE CHARGE PLANTE CONTROVER AND CONTRO
		- 	□Change
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n/a 				
				
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ffective date, if other	er than the date of filing:	egv	(optional)	(05.0307
Note: If the date inse	ted in this block does not meet the a	oplicable statutory filing re	quirements, this date will n	ot be listed as
ocument's effective	late on the Department of State's rec	ords.		
record specifies a de	ayed effective date, but not an effecti	ve time at 12:01 a.m. on t	he earlier of: (b) The 90th	day after the
d is filed.	.,		• • • • • • • • • • • • • • • • • •	aa, a a.e
C. ~~	ath	0 -		
Dated SEPT		17.		
	Shranka			
	Signature of a member or	authorized representative of a	member	
	<u> </u>	•		

Filing Fee: \$25.00