

L 23000409126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

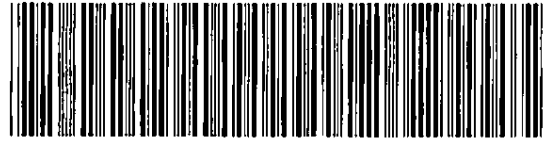
(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ATC Group, 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:

Ashley Johnson
Name of Person

ATown of Class Remodeling, LLC
Firm/Company

2335 Douglas Rd, lot A
Address

Panama City, FL 32405
City/State and Zip Code

builderbarbie850@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ashley Johnson at 850 819 4843
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

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

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>
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<u>Ambr</u>	<u>Daniel C. Anglin</u>	<u>428 N Anita Dr</u>	<input checked="" type="checkbox"/> Add
		<u>Panama City, FL</u>	<input type="checkbox"/> Remove
		<u>32404</u>	<input type="checkbox"/> Change

<u>Ambr</u>	<u>Christopher</u>	<u>428 N. Anita Dr</u>	<input checked="" type="checkbox"/> Add
	<u>A Nordan</u>	<u>Panama City, FL</u>	<input type="checkbox"/> Remove
		<u>32404</u>	<input type="checkbox"/> Change

<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
		<u> </u>	<input type="checkbox"/> Remove
		<u> </u>	<input type="checkbox"/> Change
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[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.

Dated September 28 2023

Signature of a member or authorized representative of a member

Ashley Lynn Johnson