

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000085844

**FILED**  
**Apr 28, 2016**  
**Secretary of State**  
**CC6486769330**

**Entity Name:** ATLANTIC ADVANTAGE LLC

**Current Principal Place of Business:**

132 SW ALICE GLN  
LAKE CITY, FL 32025

**Current Mailing Address:**

132 SW ALICE GLN  
LAKE CITY, FL 32025

**FEI Number:** 47-4241749

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LATHRA MANAGEMENT LLC  
132 SW ALICE GLN  
LAKE CITY, FL 32025 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            SALERNO, JOSEPH  
Address        147 MONELL AVE  
City-State-Zip: ISLIP NY 11751

Title            AMBR  
Name            ATLANTIC GATEWAY LLC  
Address        132 SW ALICE GLN  
City-State-Zip: LAKE CITY FL 32025

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TOM DAVIES

AMBR

04/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date