## Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

: (307)200-2803 Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

mail	Address:		

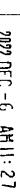
## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **EARTHY ATLAS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

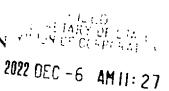
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Electronic Filing Menu Corporate Filing Menu

Help



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF ORGANIZATION



Earthy Atlas LLC

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

The Articles of Organization for this Limited Lia Florida document number L22000147372	bility Company w	ere filed on <u>03/25/</u>	22	and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liabili	ty company here:		
The new name must be distinguishable and contain the wo	rds "Limited Liability	Company." the designati	on "LLC" or the abbrev	riation "L.L.C."
Enter new principal offices address, if applica	ble:	• • •		
(Principal office address MUST BE A STREET	ADDRESS)	,,		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B  B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office ad	dress on our records	, enter the name of	the new registered
Name of New Registered Agent:	Registered	Agents Inc		
New Registered Office Address:	New Registered Office Address: 7901 4th St N STE 300  Enter Florida street address			
	St. Petersbi	arg	<sub>. Florida</sub> <u>3</u> 370	)2
		City		Zip 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	KEVIN MICHAEL CRUZ	7901 4th St N STE 300	X≀Add
		St. Petersburg, FL 33702	□Remove
			□Change
			□Add
			□Remove
		<del></del>	□ Change
<del></del>			□Add
			□Remove
			□Change
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	4		DAdd
			Remove
			□Change
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Control of the Contro		1411			
fective date, if other than the da n effective date is listed, the date must be ote: If the date inserted in this block cument's effective date on the Depa	specific and cannot be prid does not meet the appl	icable statutory filing r		ig.) Pursuant to 605.	
ecord specifies a delayed effective da is filed.	te, but not an effective	time, at 12:01 a.m. on	the earlier of: (b)	Fhe 90th day after	· the
<sub>ted</sub> December 6	. 2022				
	Rilmy	72.4			
	اختصاني المستعدان				

Filing Fee: \$25.00