L22000298693

(R	equestor's Name)	
	ddress)	.
·	·	
(Ad	ddress)	
(C	ity/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer.	
	J. HORN	-
	NOV -9 20)22

Office Use Only



500396758275

2022 NOV -8 PM 3: 15

RECEIVED



Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 11/8/2022	
	WALK IN
ENTITY NAME PASTR	Y MASTER LLC
DOCUMENT NUMBER_	
	PLEASE FILE THE ATTACHED AND RETURN
	Plain Copy
XXXXXXXXX	Certified Copy
XXXXXXXXXXX	Certificate of Status
/	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY Certified Copy of Arts & Amendments Certified Copy of Arts & Amendments Complete File (Including Annual Reports) Certificate of Status Certificate of Status Reflecting:
	APOSTILLE' / NOTARIAL CERTIFICATION
COUNTRY OF DESTINATION	
NUMBER OF CERTIFICAT	ES REQUESTED
TOTAL OWED \$ 60.00	ACCOUNT # 120160000072 4: ()
Please call Tina at the	above number for any issues or concerns. Thank you so much!

COVER LETTER

TO:		stration Section of Corp			
SUBJE	CT·	PASTRY N	MASTER LLC		
SUBJE	.C.I		Name of Lim	ited Liability Company	
The enc	closed a	Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please 1	eturn a	ill correspon	dence concerning this matter	to the following:	
			Bradley Richard Thompso	n	
				Name of Person	
			Altro LLP		
				Firm/Company	
			155 University Avenue, S	uite 300	
				Address	
			Toronto, Ontario, Canad	la, M5H 3B7	
				City/State and Zip Code	
			bthompson@altrola	w.com	
			E-mail address: (to be used for future annual report noti	fication)
For furt	ther inf	ormation co	ncerning this matter, please ca	all:	
	Bradl	ey Richard '	l'hompson	at (514) 940-8074	
		Name of	Person	Area Code Daytim	e Telephone Number
Enclose	ed is a	check for the	e following amount:		
□ \$2±	5.00 Fi	ling 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)
		ing Address istration S		Street Address; Registration Se	ction
			orporations	Division of Cor	-
		Box 6321 ahassee, F		The Centre of T 2415 N. Monro	allahassee e Street, Suite 810

Tallahassee, FL 32303

COVER LETTER

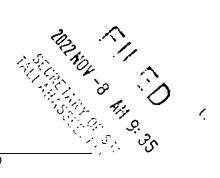
Registration Section

TO:

Divis	tion of Cor	porations		
SUBJECT:	PASTRY	MASTER LLC		
SUBJECT			ited Liability Company	
The enclosed	Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return a	all correspo	ndence concerning this matter	to the following:	
		Bradley Richard Thompso	on	
			Name of Person	
		Altro LLP		
			Firm/Company	
		155 University Avenue, S		
			Address	
		Toronto, Ontario, Canad		
		bthompson@altrola	City/State and Zip Code	
			to be used for future annual report no	tification)
For further inf	formation co	oncerning this matter, please c	all:	
Bradi	ley Richard	Thompson	at (514) 940-8074 Area Code Daytii	
	Name of	Person	Area Code Daytii	ne Telephone Number
Enclosed is a	check for th	e following amount:		
□ \$25.00 Fi	ling 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)
Reg	ing Address istration S	Section	Street Address: Registration Se	
	lsion of C . Box 632	orporations 7	Division of Co The Centre of	
	ahassee, F			pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



PASTRY MASTER LLC

company has been notified in writing of this change.

(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 Liability Company v	vere filed on July 6, 2022	_ and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
ATLJAS LLC		
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office ac	dress on our records, enter the name o	f the new registered
agent and/or the new registered office address here:	interest on our records, energine mane o	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of	performance of my duties, and I am fan rovided for in Chapter 605, F.S. Or, if i	uiliar with and this document is

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
			🗆 🖊 dd
			[]Remove
			[]Change
			□Add
			□Remove
			[] Change
			□Add
			Remove
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			Remove
			□Change
	 		□Add
			□ Remove
			Change
		□Add	
			□Remove
			□Change

	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	•
_	
_	
	
_	
1100	the result of the first
Note: If	late, if other than the date of filing:
ne record ord is file	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
Dated _	November 8 , ,
	/s/ Andy Buntic
	Signature of a member or authorized representative of a member
	Andy Buntic
	Typed or printed name of signee

Filing Fee: \$25.00