M1800000 8022

(Requ	uestor's Name))		
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JUN 13 2019 S. YOUNG



May 13, 2019

JESENIA GIL STOK FOLK + KON 1 EAST BROWARD BLVD STE 915 FORT LAUDERDALE, FL 33301

SUBJECT: ATHOS CAPITAL, LLC Ref. Number: M18000008022

We have received your document for ATHOS CAPITAL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA, but your entity is a FOREIGN. Please complete and return the enclosed blank form(s).

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 719A00009639

COVER LETTER

TO:

Registration Section Division of Corporations

Dear Sir or Madam: The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:
Please return all correspondence concerning this matter to the following:
Tesenia Gil Name of Person
Stok Kon + Braverman Firm/Company
1 East Broward Blvd, Suite 915
Fort Lauder dale, FL 33301 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Tesenia GI at (954) 237-1777 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount: S25 Filing Fee \$\sum \text{S30 Filing Fee & S55 Filing Fee & Certificate of Status}\$ CR2E055 (9/15) S55 Filing Fee & S60 Filing Fee, Certificate of Status & Certified Copy

2

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	s on the records of the Florida	Department of
State: ATHOS Capital, 1	UC	
Enter new principal office address, if applicable:		
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6 PX 2: 07
2. The Florida document number of this limited lia	, , ,	000008022
3. Jurisdiction of its organization: Delaw		
4. Date authorized to do business in Florida: 8	31 2018	
SECTION II (5-9 complete only the applicable		
5. New name of the limited liability company: (mus	Grand Capita contain "Limited Liability C	ompany, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mamust contain "Limited Liability Company," "L.L.C	naging members adopting the	g business in Florida and attach a alternate name. The alternate name
6. If amending the registered agent and/or registere registered agent and/or the new registered office ac		rds, enter the name of the new
Name of New Registered Agent:	-	
New Registered Office Address:		
	Enter Flor	ida Street Address
	Z11.	, Florida
	City	Zip Code

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

Thereby 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 jamiliar 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.

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Fifing Fee: \$25.00

Typed or printed name of signee

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "USA HOLDINGS, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE SIXTH DAY OF JUNE, A.D. 2019.

Authentication: 202966724

Date: 06-06-19