P150000 10666

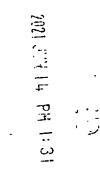
(Re	questor's Name)	
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PICK-UP	MAIT	MAIL.
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Atlantis 58, Inc				
	BER: P15000010666				
The enclosed Articles	s of Amendment and fee are st	ibmitted for filing.			
Please return all corre	espondence concerning this ma	atter to the following:			
	Jason B. Giller				
		Name of Contact Person	n		
	Jason B. Giller, P.A.				
	Firm/ Company				
	1111 Brickell Ave., Suite 1550				
	Address				
	Miami, FL 33131				
	City/ State and Zip Code				
	iren@gillerpa.com				
		sed for future annual report	notification)		
For further informatic	on concerning this matter, pica		999-1906		
Name of Contact Person		at (305 Area Co	_)		
	or the following amount made				
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassec 2415 N. Monroe Street, Suite 810			

Tatlahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	of	
Atlantis 58, Inc.		
(Name of Corporation as curren	tly filed with the Florida Dept, of State)	
P15000010666		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment	(s) to
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	1000 S Point Drive, Unit 604	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Miami Beach, FL 33139-7327	
	2.2	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Clotason & Gillen 1829. 1111 Brickell Ave., Suite 1550	
(a)	Miami, FL 33131	
D. If amending the registered agent and/or registered sifice ad	dress in Florida, enter the name of the	
new registered agent and/or the new registered affice addre		
Name of New Registered Agent		
! 1 1 Brighell Are Stille	1350	
(Florida s	street address)	
New Registered Office Address: Miami	, Florida 33131	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Ager		
I hereby accept the appointment as registered agent. I am familian		
	21	
Signature of New	Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u> .	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	 <u>Addres</u> s
l) Change		_ N(U	
Add			
Remove		6/1	
2) Change			
Add		. /	
Remove 3) Change		NA	
Add			
Remove		1/6	
4) Change		_ <u> </u>	
Add			
Remove		\mathcal{A}	
5) Change			
Add		<i>.</i>	
Remove		1.	
6) Change		MA	
Add		1	
Remove		٠	

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an amendment provides	for an exchange, re-	classification, or car	cellation of issued	shares,
provisions for implementi	ng the amendment i	f not contained in t	<u>he amendment itsel</u>	<u>lf:</u>
provisions for implement.	ate N/A)			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutery filing requirements, this date we document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action ar action was not required.	nd shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval	2021 JUN 1 4
by	
(voting group)	2 · · ·
	π st
Dated	
Signature (By director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
Tricorporator Attorney A. R. (Title of person signing)	
(Title of person signing)	

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