## P16600340776

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: ATLAS INTERNA	ATIONAL CONSULTING	INC
DOCUMENT NUMBE	P16000040776		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspondent	ondence concerning this ma	tter to the following:	
Т	UNC TARHAN		
_		Name of Contact Person	1
_		Firm/ Company	
54	416 NW 50TH COURT		
		Address	
C	OCONUT CREEK, FL 33	073	
		City/ State and Zip Cod	e
TARHA	NALP@YAHOO.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
TUNC TARHAN		954 at (	319-6686
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fec & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amene Divisi P.O. E	ng Address dment Section on of Corporations sox 6327 assee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation	on as currently filed with the Fl	lorida Dept. of State)
P16000040776		
(Docum	nent Number of Corporation (if ki	nown)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this <i>Florida Profit Cor</i>	rporation adopts the following amendmen
A. If amending name, enter the new name of the co	rporation:	
DESIGNS BY BURCHE INC.		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the d	" "Inc," or "Co". A profession	or "incorporated" or the abbreviation
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		<u> </u>
		TE B
		5,72
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	X)	A.
		على شرب رميم وس
		ر براه بیشتر این میشود:
		,
D. If amending the registered agent and/or register new registered agent and/or the new registered		ter the name of the
	once address.	
Name of New Registered Agent		<del></del>
	(Florida street address)	<u></u>
	(r tortuu sireet uuuress)	
New Registered Office Address:	(City)	, Florida(Zip Code)
	(0.5)	(4)
New Registered Agent's Signature, if changing Reg	istered Agent:	11 63
I hereby accept the appointment as registered agent.	I am familiar with and accept the	e obligations of the position.
Pian	ature of New Registered Agent is	Cohanging

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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issundence if not contained in the amendment it	ed shares, self:
()		
· ·····		<u> </u>
	· ··	

The date of each amendment(s) addate this document was signed.	loption:	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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	
by		
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
<b>08</b> /11/2017 Dated		
Signature		
	rector, president or other officer – if directors or officers have not been	_
	d, by an incorporator – if in the hands of a receiver, trustee, or other court	
appoint	ed fiduciary by that fiduciary)	
	TUNC TARHAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	